

MARGIN RESERVED FOR INDEXING

WITH UNFADING INK—THIS IS A PERMANENT RECORD

IN CASE OF TWIN OR TRIPLET BIRTH, REPORT SEPARATE BLANKS FOR EACH CHILD

(1) PLACE OF BIRTH

County of Chapel Hill
 Township of Swanton
 or
 Inc. Town of
 or
 City of

CERTIFICATE OF BIRTH
 STATE OF SOUTH CAROLINA
 Bureau of Vital Statistics
 State Board of Health

File No.—For State Registrar Only
653

Registration District No. 9:2 Registered No. 3
 (For use of Local Registrar)

(No. St.; Ward)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Melvin Herman Harden If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL <u>Boy</u>	(4) Twin or Triplet? To be answered only in event of Twin or Triplets	(5) Number in order of birth	(6) Age Parents Married? <u>Yrs</u>	(7) DATE OF BIRTH <u>Jan. 22, 1922</u> (Name of Month) (Day) (Year)
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FATHER.

(8) FULL NAME Lyde C. Harden
 (9) PRESENT POSTOFFICE OF FATHER FA Monticre SC
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 34 (Years)
 (12) BIRTHPLACE Marbury Ia.
 (13) OCCUPATION breeder
 (20) Number of children born to mother, including present birth 12

MOTHER.

(14) NAME BEFORE MARRIAGE Sylvia Helen Hamer
 (15) PRESENT POSTOFFICE OF MOTHER FA Monticre SC
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 26 (Years)
 (18) BIRTHPLACE Blairsville Pa
 (19) OCCUPATION House wife
 (21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(22) I hereby certify that I attended the birth of this child, who was alive at 10:40 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) M. H. Phasunt
 (24) State, whether Physician or Midwife
 (25) Address of Physician or Midwife Physician Mt Pleasant SC

Given name added from a supplemental report
 (26) Witness (Signature of Witness necessary only when question 23 is signed by mother)
 (27) Filed July 31, 1922 (28) Local Registrar
 19 Registrar

When there was no attending physician or midwife, then the father, householder, etc., should make this return. If a child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.

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