

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
 N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the
 FIRST-BORN, No. 1, THE OTHER, No. 2, etc., in question 1.

(1) PLACE OF BIRTH

County of Orangeburg
 Township of City
 or
 Inc. Town of
 or
 City of Orangeburg
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

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

No. 11506
 (For use of Local Registrar)

Registration District No. 36A

Registered No. 78
 (For use of Local Registrar)

(No. 3A Date 7/2 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 Burtidge China Haer

If child is not yet named, make supplemental report as directed

(3) SEX OR GIRL Boy (4) Twin or Triplet — (5) Number in order of birth — (6) Are Parents Married yes (7) DATE OF BIRTH July 7, 1923
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Robert Lee Haer
 (9) PRESENT POSTOFFICE OF FATHER Orangeburg S.C.
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 32
 (12) BIRTHPLACE S.C.
 (13) OCCUPATION Mechanic
 (14) Number of children born to mother, including present birth Four

MOTHER.

(14) NAME BEFORE MARRIAGE Dennis Gustine Hopkins
 (15) PRESENT POSTOFFICE OF MOTHER Orangeburg S.C.
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 29
 (18) BIRTHPLACE S.C.
 (19) OCCUPATION Housewife
 (20) Number of children of this mother now living, including present birth Four

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(22) (Signature) W. B. Haer

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Orangeburg

Given name added from a supplemental report

(26) Witness

(Signature of Witness necessary only when question 22 is signed by mark)

(27) Filed 5/2 1923

(28) W. B. Haer Local 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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