(1) PLACE OF BIRTH

County of Calhoun

Township of Lan Lan

or

Inc. Town of .....

or

City of ..... (No. ..... St.; ..... Ward)

(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

File No.—For State Registrar Only
29130

Registration District No. 801 Registered No. 85
(For use of Local Registrar)

(2) Full Name of Child Edward Huckson [If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL?	(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parents Married?	(7) DATE OF BIRTH
Boy	To be answered only in event of Twins or Triplets		yes	Sept 29 1922 (Name of Month) (Day) (Year)

FATHER.		MOTHER.	
(8) FULL NAME	Sulters Huckson	(14) NAME BEFORE MARRIAGE	Maxie Caldwell
(9) PRESENT POSTOFFICE OF FATHER	St Matthews	(15) PRESENT POSTOFFICE OF MOTHER	St Matthews
(10) COLOR OR RACE	Negro	(16) COLOR OR RACE	Negro
(11) AGE AT LAST BIRTHDAY (Years)	28	(17) AGE AT LAST BIRTHDAY (Years)	24
(12) BIRTHPLACE	S.C.	(18) BIRTHPLACE	S.C.
(13) OCCUPATION	Farm hand	(19) OCCUPATION	Farm hand
(20) Number of children born to mother, including present birth	4	(21) Number of children of this mother now living, including present birth	3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Born alive at 11 A.M., on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)

(23) (Signature) Hella McLendon

(24) State whether Physician or Midwife | (25) Address of Physician or Midwife

Given name added from a supplemental report

..... 19 ....
Registrar

(26) Witness .....
(Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed Oct 5 1922 (28) F. H. Murph
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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A C Smith sub

McCAW OF COLUMBIA, COLUMBIA, S. C.
FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.