

THIS IS A PREPARED FORM FOR THE REGISTRATION OF BIRTHS. IT IS TO BE FILLED OUT BY THE REGISTRAR OR BY THE FATHER OR MOTHER OF THE CHILD. IT IS TO BE FILED IN THE OFFICE OF THE REGISTRAR. IT IS TO BE KEPT IN THE OFFICE OF THE REGISTRAR FOR A PERIOD OF FIVE YEARS. IT IS TO BE DESTROYED AFTER THAT PERIOD. IT IS TO BE KEPT IN THE OFFICE OF THE REGISTRAR FOR A PERIOD OF FIVE YEARS. IT IS TO BE DESTROYED AFTER THAT PERIOD.

(1) PLACE OF BIRTH

County of Hampton
Township of Lawson
or
Inc. Town of
or
City of

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

Registration District No. 2401 Registered No. 98
(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.)

File No.—For State Registrar Only
90276

(2) Full Name of Child Maggie Garvin If child is not yet named, make supplemental report as directed

(3) ~~Is the child~~ GIRL? (4) Twin or Triplet? (5) Number in order of birth 3 (6) Are Parents Married Yes (7) DATE OF BIRTH Dec. 6, 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Isaac Garvin
(9) PRESENT POSTOFFICE OF FATHER Hamlet S.C.R.F.D. #1
(10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY 34
(Years)
(12) BIRTHPLACE S.C.
(13) OCCUPATION Farmer
(20) Number of children born to mother, including present birth Three

MOTHER.

(14) NAME BEFORE MARRIAGE Angeline Taylor
(15) PRESENT POSTOFFICE OF MOTHER Hamlet S.C.R.F.D. #1
(16) COLOR OR RACE Black (17) AGE AT LAST BIRTHDAY 22
(Years)
(18) BIRTHPLACE S.C.
(19) OCCUPATION Farm help
(21) Number of children of this mother now living, including present birth Three

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 3 P.M. on the date above stated.
(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Clayton Deaton

(24) State whether Physician or Midwife (25) Address of Physician or Midwife
Midwife Hamlet S.C.R.F.D. #1

Given name added from a supplemental report

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

(27) Filed Dec. 16, 1916 (28) James C. Richardson
Registrar

*When there was no attending physician or midwife, then the father, householder, etc., should make 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.