

(1) PLACE OF BIRTH

County of

Township of

Inc. Town of

City of Charleston

(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

27416

Registration District No. 9A

Registered No.

(For use of Local Registrar)

St. 3 Ward 3(2) Full Name of Child Jewel Houser Carroll

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

(3) BOY OR GIRL? Girl

(4) Twin or Triplet?

(5) Number in order of birth

(To be entered only in case of twin or triplet)

(6) Are Parents Married? Yes(7) DATE OF BIRTH Sept. 29

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Howell Mathew Carroll

(9) PRESENT POSTOFFICE OF FATHER

Charleston, S.C.(10) COLOR OR RACE White(11) AGE AT LAST BIRTHDAY 26

(Years)

(12) BIRTHPLACE

Rowenel, S.C.

(13) OCCUPATION

Line Man City RR

(14) Number of children born to mother, including present birth

Three

MOTHER

(14) NAME BEFORE MARRIAGE

Burine bannash

(15) PRESENT POSTOFFICE OF MOTHER

Charleston, S.C.(16) COLOR OR RACE White(17) AGE AT LAST BIRTHDAY 27

(Years)

(18) BIRTHPLACE

Harleyville, S.C.

(19) OCCUPATION

Wife

(20) 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 on the date above stated.

(Hour A. M. or P. M.)

(23) (Signature) Dr. J. M. Green

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

Physician Charleston S.C.

Given name added from a supplemental report

(26) Witness

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

(27) Filed 10/10 19123

Registrar

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.