

WITH PLAINLY WITH UNPAIDING IT—THIS IS A PERMANENT RECORD.

**II (1) PLACE OF BIRTH**

County of Bellevue  
Township of North  
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. 1342

File No.—For State Registrar Only

892

Registered No. 2  
(For use of Local Registrar)

City of ..... (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 Dayana Huter

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	Yes	16	Yes	Jan 10 1942

**FATHER.**

(8) FULL NAME Peter Huxley  
(9) PRESENT POSTOFFICE OF FATHER Manning St  
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 43 (Years)  
(12) BIRTHPLACE St  
(13) OCCUPATION Farming  
(20) Number of children born to \_\_\_\_\_  
\_\_\_\_\_

**MOTHER**

(14) NAME BEFORE MARRIAGE *Kerney Hasley*

(15) PRESENT POSTOFFICE OF MOTHER *Marmuch, SC*

(16) COLOR OR RACE *White* (17) AGE AT LAST BIRTHDAY *42* (Years)

(18) BIRTHPLACE *Hammer, S.C.*

(19) OCCUPATION *Housewife*

(21) Number of children of this mother *11* *13*

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.**

(22) I hereby certify that I attended the birth of this child, who was..... alive ..... at..... 9 ..... M.,  
on the date above stated. (Born alive or stillborn) (Hour : M. or P.M.)

(23) (Signature)

(24) State whether Physician or Midwife

(73) Address of Physician or Midwife

Given name added from a supplemental report

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

(37) Filed Jan 14 1934 (28) H. J. ...

\*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.