

MARGIN RESERVED FOR BINDING.

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.

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

(1) PLACE OF BIRTH
County of Charleston
Township of St. Philip
Inc. Town of St. Philip
City of St. Philip (No. 9-13 St.; 23 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
27511

Registered No. 23
(For use of Local Registrar)

(2) Full Name of Child Calvin Conrad Dawson (If child is not yet named, make supplemental report as directed)

(3) SEX OF CHILD Boy (4) Twin or Triplet No (5) Number in order of birth 1 (6) Age at birth 1 year (7) DATE OF BIRTH Sept 8, 1910
(Name of each) (Day) (Year)

FATHER.
(8) FULL NAME Henry C. Dawson
(9) PRESENT POSTOFFICE OF FATHER St. Philip
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 30 (Years)
(12) BIRTHPLACE Va
(13) OCCUPATION Port Master
(20) Number of children born to mother, including present birth 1

MOTHER.
(14) NAME BEFORE MARRIAGE Marjorie Parker
(15) PRESENT POSTOFFICE OF MOTHER St. Philip
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 23 (Years)
(18) BIRTHPLACE SC
(19) OCCUPATION Domestic
(21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*
(22) I hereby certify that I attended the birth of this child, who was born at 104 M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)
(23) (Signature) James M. Thompson
(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife St. Philip

(26) Witness Chas. Edwin Lin (Signature of Witness necessary only when question 23 is signed by mother)
(27) Filed Sept 10, 1910 (28) Chas. Edwin Lin Local Registrar

(Given name added from a supplemental report)

*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 directed of stillbirths before the fifth month of pregnancy.