

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.  
N. E.—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 5.

(1) PLACE OF BIRTH

County of Charleston  
Township of Cavelt & Lane  
or  
Inc. Town of .....

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

89065

Registration District No. 1203 Registered No. 233  
(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 Lewis Diggs If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Boy (4) Twin or Triplet? yes (5) Number in order of birth 2 (6) Are Parents Married? yes (7) DATE OF BIRTH Nov 8 1916  
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Joseph Diggs  
(9) PRESENT POSTOFFICE OF FATHER Charleston SC #3  
(10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY 40 (Years)  
(12) BIRTHPLACE W. C.  
(13) OCCUPATION Farmer  
(20) Number of children born to mother, including present birth 9

MOTHER.

(14) NAME BEFORE MARRIAGE Sally Lane  
(15) PRESENT POSTOFFICE OF MOTHER Charleston SC #3  
(16) COLOR OR RACE Black (17) AGE AT LAST BIRTHDAY 34 (Years)  
(18) BIRTHPLACE Charleston Co  
(19) OCCUPATION Keep on Farmer  
(21) Number of children of this mother now living, including present birth 8

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was Lewis Diggs at 4:00 P. M.,  
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Dinah Lane

(24) State whether Physician or Midwife Midwife

(25) Address of Physician or Midwife Charleston SC #3

Given name added from a supplemental report

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

(27) Filed Dec 8 1916 (28) J. E. Mulvey 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.