

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 6.

McGraw-Hill, Columbia, S. C.

(1) PLACE OF BIRTH

County of Charleston
Township of St. P. St. M.
or
Inc. Town of Liberty Hill
or
City of Liberty Hill (No. 10 Mile St.; 224 Ward)
(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

41405

Registration District No. 909 Registered No. 224
(For use of Local Registrar)

(2) Full Name of Child George Hopkins { If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Dec 23 1922
(Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME Low Hopkins
(9) PRESENT POSTOFFICE OF FATHER North Charleston
(10) COLOR OR RACE col. (11) AGE AT LAST BIRTHDAY 25 (Years)
(12) BIRTHPLACE Liberty Hill
(13) OCCUPATION Labourer at Oakdene C. P.
(20) Number of children born to mother, including present birth 2

MOTHER.
(14) NAME BEFORE MARRIAGE Irisan Abrahams
(15) PRESENT POSTOFFICE OF MOTHER North Charleston
(16) COLOR OR RACE col. (17) AGE AT LAST BIRTHDAY 23 (Years)
(18) BIRTHPLACE Liberty Hill
(19) OCCUPATION Housework
(21) Number of children of this mother now living, including present birth 2

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) Belia Nelson
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife 10 Mile

Given name added from a supplemental report

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

(27) Filed Dec 28 1922 (28) C. F. Myers 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.

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