

Form No. 1

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

File No.—For State Registrar Only
74691

(1) PLACE OF BIRTH

County of Spartanburg
Township of Campobello

or
Inc. Town of

Registration District No. 40-C Registered No. 139
(For use of Local Registrar)

or
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

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

(3) BOY OR GIRL? Boy (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? Yes (7) DATE OF BIRTH Aug 8 1916
To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

MOTHER.

(8) FULL NAME Andrew Jackson Harris

(14) NAME BEFORE MARRIAGE Lillian May Edgington

(9) PRESENT POSTOFFICE OF FATHER Campobello S.C.

(15) PRESENT POSTOFFICE OF MOTHER Campobello S.C.

(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 28 (Years)

(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 18 (Years)

(12) BIRTHPLACE Campobello S.C.

(18) BIRTHPLACE Campobello S.C.

(13) OCCUPATION Farmer

(19) OCCUPATION Housewife

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

(21) Number of children of this mother now living, including present birth Two

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 6:30 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) R. B. Gibson, M.D. (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Inman, 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 Aug 8 1916 (28) E. C. 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.