

(1) PLACE OF BIRTH
County of Charleston S.C.

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

File No.—For State Registrar Only

88700

Township of

or
Inc. Town of

Registration District No. 97

Registered No. 1379

(For use of Local Registrar)

City of Charleston S.C. (No. 78 President 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 Isaac Harry } If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Boy
girl

(4) Twin or Triplet? No

(5) Number in order of birth 1

(6) Are Parents Married? Yes

(7) DATE OF BIRTH—December 25, 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Isaac Grant

(9) PRESENT POSTOFFICE OF FATHER 78 President St. Charleston S.C.

(10) COLOR OR RACE colored

(11) AGE AT LAST BIRTHDAY 25
(Years)

(12) BIRTHPLACE Charleston S.C.

(13) OCCUPATION Baker

(20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Ehga Williams

(15) PRESENT POSTOFFICE OF MOTHER 78 President St. Charleston S.C.

(16) COLOR OR RACE colored

(17) AGE AT LAST BIRTHDAY 19
(Years)

(18) BIRTHPLACE Charleston S.C.

(19) OCCUPATION House wife

(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 alive, at 11 P.M.,
(Born alive or stillborn) (Hour A. M. or P. M.)
on the date above stated.

(23) (Signature) Mrs. H. S. Lawrence

(24) State whether Physician or Midwife midwife

(25) Address of Physician or Midwife 35 Allway St.

Given name added from a supplemental report

3/29/17, 1917

Thos. P. Lawrence
Registrar

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

(27) Filed 12/17/16 (28) J. Mercer

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.

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.