

6/10/43

22 049404*

No ~~Copies~~.

MARGIN RESERVED FOR BINDING
WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD
FOR EACH CHILD, and mark the
FIRST-BORN, No. 1 THE OTHER, No. 2, etc., in question 5.

1. PLACE OF BIRTH

County of Richland
Township of _____
or
Inc. Town of Columbia, S.
or
City of _____
(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

01147

Registration District No. 38. aRegistered No. _____
(For use of Local Registrar)(No. 2121 Pendleton St.; _____ Ward)2. FULL NAME OF CHILD Eva Rebecca Grant3. BOY OR GIRL Girl

4. Twin or Triplet?

5. Number in order of birth 16. Are Parents Married? Yes

7. DATE OF BIRTH

April 16, 1943
(Name of Month) (Day) (Year)

To be answered only in event of Twins or Triplets

FATHER

8. FULL NAME Herbert Fitzsimmons Grant

9. ADDRESS AT CHILD'S BIRTH

Columbia, S. C.10. COLOR OR RACE Col.11. AGE AT CHILD'S BIRTH 20
(Years)

12. BIRTHPLACE

Fort Motte, South Carolina

13. OCCUPATION

Truck Driver20. Number of children born to mother, including present birth 1

MOTHER

14. NAME BEFORE MARRIAGE

Rebecca Elizabeth Seabrooks

15. ADDRESS AT CHILD'S BIRTH

Columbia, S. C.16. COLOR OR RACE Col.17. AGE AT CHILD'S BIRTH 19
(Years)

18. BIRTHPLACE

Columbia, South Carolina

19. OCCUPATION

Housework21. 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 Alive at 11:50 P.M.
(Born alive or stillborn) (Hour A.M. or P.M.)
on the date above stated.

23. Signature Mary L. Hampton
24. State whether Physician or Midwife Midwife

25. Address of Physician or Midwife
1229 Hampton St. Columbia, S.C.

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

27. Filed 6/10 1943

28. M. B. Woodward, M.D.
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.