

## (1) PLACE OF BIRTH

County of

Augusta

Township of

Chalchola

Inc. Town of

You or see

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

64756

Registration District No. 1103

Registered No. 35

(For use of Local Registrar)

(2) Full Name of Child Chace Eela Hugen

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

(3) BOY OR GIRL? Girl

(4) Twin or Triplet? X

(5) Number in order of birth 2

(6) Are Parents Married? Yes

(7) DATE OF BIRTH June 22, 1916

## FATHER.

(8) FULL NAME

Peter Hugen

(9) PRESENT POSTOFFICE OF FATHER

Yemassee SC

(10) COLOR OR RACE

Negro

(11) AGE AT LAST BIRTHDAY 23 (Years)

(12) BIRTHPLACE

S. C.

(13) OCCUPATION

Farmer

(20) Number of children born to mother, including present birth 2

## MOTHER.

(14) NAME BEFORE MARRIAGE

Christiana Creech

(15) PRESENT POSTOFFICE OF MOTHER

Yemassee SC

(16) COLOR OR RACE

Negro

(17) AGE AT LAST BIRTHDAY 31 (Years)

(18) BIRTHPLACE

S. C.

(19) OCCUPATION

Farm Laborer

(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 alive at 1.0 A. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Daisy Proctor

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Midwife

Sheldon SC R1

Given name added from a supplemental report

(26) Witness

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

(27) Filed

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(28)

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.

MAKING RESERVED FOR BINDING.  
 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  
 McCaw, of Columbia. FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.