

(1) PLACE OF BIRTH

County of Union

Township of Union

or Inc. Town of

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

53952

Registration District No. 42-A Registered No. 41

(For use of Local Registrar)

(2) Full Name of Child Earl Francis Lawson If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Boy

(4) TWINS OR TRIPLETS? No
To be answered only in case of twins or triplets

(5) Number in order of birth 4

(6) Are Parents Married? Yes

(7) DATE OF BIRTH Mar. 26 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Walter F. Lawson

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

(10) COLOR OR RACE White

(11) AGE AT LAST BIRTHDAY 34
(Years)

(12) BIRTHPLACE Union County

(13) OCCUPATION Teacher

(20) Number of children born to mother, including present birth 4

MOTHER.

(14) NAME BEFORE MARRIAGE Etta Harries

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

(16) COLOR OR RACE White

(17) AGE AT LAST BIRTHDAY 35
(Years)

(18) BIRTHPLACE Partonburg County

(19) OCCUPATION None

(21) Number of children of this mother now living, including present birth 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born at 7 a. M., on the date above stated.
(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) A. J. McCreary

(24) State whether Physician or Midwife (25) Address of Physician or Midwife Union S.C.

Given name added from a supplemental report

(26) Witness

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

124143 1916
L. A. Piser M.D.
Registrar

(27) Filed Mar 30 1916

(28) S. G. Swarratt

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.

ALLIGING MEMBERSHIP FROM BIRTH TO DEATH. WITH UNPAID TAXES. IN A PERMANENT RECORD. 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 5.

McCaw, of Columbia.