

(1) PLACE OF BIRTH

County of FlorenceTownship of Lynch

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

55849

Registration District No. 2010Registered No. 18

(For use of Local Registrar)

(2) Full Name of Child Alger Bascilla Hagin If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? <u>Girl</u>	(4) Twin or Triplet?	(5) Number in order of birth <u>4th</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>April 4</u> (Name of Month) (Day) (Year)
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FATHER.

(8) FULL NAME J. A. Hagin(9) PRESENT POSTOFFICE OF FATHER Lawrence SC(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 38 (Years)(12) BIRTHPLACE Florence County SC(13) OCCUPATION Farmer(20) Number of children born to mother, including present birth 4

MOTHER.

(14) NAME BEFORE MARRIAGE Vivian Lee(15) PRESENT POSTOFFICE OF MOTHER Lawrence SC(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 26 (Years)(18) BIRTHPLACE Florence SC(19) OCCUPATION Housewife(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 alive on the date above stated.(23) (Signature) Dr. Livingston Lee

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Physician Lawrence SC

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 22 is signed by mark)

(27) Filed April 6 1914 E. L. [Signature]

Registrar

When there was no attending physician or midwife, then the father, householder, etc., should sign and return. If a child breathes even once, it must not be reported as stillborn. No report is desired of stillborns before the fifth month of pregnancy.

N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the FIRST-BORN, No. 1, THE OTHERS, No. 2, etc., in question 5.