

Form No. 1

(1) PLACE OF BIRTH

County of Hampton
Township of Edisto
or
Inc. Town of Edisto
or
City of

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

File No. For State Registrar Only
42917

Registration District No. 1401 Registered No. 120
(For use of Local Registrar)

(No. 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 Walter Hopkins { If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? boy (4) Twin or Triplet? To be answered only in event of Twins or Triplets (5) Number in order of birth (6) Are Parents Married? yes (7) DATE OF BIRTH Dec. 19, 22
(Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME Wilson Hopkins
(9) PRESENT POSTOFFICE OF FATHER Garnett R.F.D.
(10) COLOR OR RACE colored (11) AGE AT LAST BIRTHDAY 29
(Year)
(12) BIRTHPLACE SC
(13) OCCUPATION Painter
(20) Number of children born to mother, including present birth 3

MOTHER.
(14) NAME BEFORE MARRIAGE Rosa Hopkins
(15) PRESENT POSTOFFICE OF MOTHER Garnett R.F.D.
(16) COLOR OR RACE colored (17) AGE AT LAST BIRTHDAY 25
(Year)
(18) BIRTHPLACE SC
(19) OCCUPATION Home Laborer
(21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) Cara Gillison
(24) State whether, Physician or Midwife Midwife (25) Address of Physician or Midwife Edisto SC

Given name added from a supplemental report
.....
..... 19

(26) Witness
(Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed 1/19 22 (28) E. D. Shubing 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.

W. F. Ellis L.R.

REPRODUCED FROM THE ORIGINAL RECORDS OF THE STATE BOARD OF HEALTH, COLUMBIA, S. C.