

(1) PLACE OF BIRTH

County of

Dorchester

Township of

or Town of

St. George's

or

City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No. - For State Registrar Only

28138

Registration District No. 1.7.03

Registered No. 26

(For use of Local Registrar)

(2) Full Name of Child

Baby Varn

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 Twin or Triplet

(5) Number in order of birth

2

(6) Are Parents Married

Yes

(7) DATE OF BIRTH

August 23

(8) FULL NAME

Harn Varn

FATHER

(9) PRESENT POSTOFFICE OF FATHER

Mauldin

(10) COLOR OR RACE

white

(11) AGE AT LAST BIRTHDAY

24

(12) BIRTHPLACE

SC

(13) OCCUPATION

St. George SC

(14) NAME BEFORE MARRIAGE

Hattie Pickens

MOTHER

(15) PRESENT POSTOFFICE OF MOTHER

St. George SC

(16) COLOR OR RACE

white

(17) AGE AT LAST BIRTHDAY

24

(18) BIRTHPLACE

SC

(19) OCCUPATION

Domestic

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

2

(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 2:40 PM

on the date above stated.

(23) (Signature)

A. S. Bell

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

St. George SC

Given name added from a supplemental report

(26) Witness

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

(27) Filed

Oct. 10, 1923

(28)

Miss Betty G. Ginn

When there was no attending physician or midwife, then the father, householder, etc., should make this report. 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.

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