

(1) PLACE OF BIRTH

CERTIFICATE OF BIRTH

File No.—For State Registrar Only

County of Charleston  
Township of St. James Santee  
OR  
Inc. Town of McCollanville  
OR  
City of \_\_\_\_\_

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

6915

Registration District No. 906 Registered No. 18  
(For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Mary Oswald Morrison If child is not yet named, make supplemental report as directed.

(3) BOY OR GIRL Girl (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Mar 16 1925  
(Name of Month) (Day) (Year)

FATHER.

MOTHER.

(8) FULL NAME Harrington Waddell Morris

(14) NAME BEFORE MARRIAGE Mary Howard Horry

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

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

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 23 (Years)

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 25 (Years)

(12) BIRTHPLACE McCollanville, S.C.

(18) BIRTHPLACE Traskville, S.C.

(13) OCCUPATION Farmer

(19) OCCUPATION Housekeeping

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

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

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 5 P. M. on the date above stated. (Born alive or stillborn) (Hour & M. or P. M.)

(23) (Signature) J. C. Morrison (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife McCollanville

Given name added from a supplemental report \_\_\_\_\_  
\_\_\_\_\_ 18 \_\_\_\_\_  
\_\_\_\_\_ Registrar

(26) Witness \_\_\_\_\_ (Signature of Witness necessary only when question 23 is signed by mark)  
(27) Filed Mar 22 1925 (28) Jed A. Beckman 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.

RECORD OF COLUMBIA, COLUMBIA, S. C.