

(1) PLACE OF BIRTH

County of Charleston
 Township of Johns Island
 or
 Inc. Town of

CERTIFICATE OF BIRTH

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

No. 3266
 (For use of Local Registrar)

Registration District No. 90-5 Registered No. 15
 (For use of Local Registrar)

City of (No. St. Ward)

(2) Full Name of Child Eugene Heckball Jr. If child is not yet named, make supplemental report as directed

(3) SEX OR Male (4) Type Free (5) Number in 1 (6) DATE OF Feb 16 1913
 or Female or Triple or order of birth Birth (7) (8) (9) (10)

FATHER. MOTHER.

(11) FULL NAME Eugene Heckball Jr. (12) NAME BEFORE MARRIAGE Susanna Middleton
 (13) PRESENT RESIDENCE OF FATHER Johns Island (14) PRESENT RESIDENCE OF MOTHER Johns Island
 (15) COLOR OR RACE W. G. S. (16) AGE AT LAST BIRTHDAY 35
 (17) BIRTHPLACE Johns Island (18) BIRTHPLACE Johns Island
 (19) OCCUPATION Farmer (20) OCCUPATION Farm Laborer
 (21) Number of children born to mother, including present one Three (22) Number of children of this mother now living, including present one Three

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE
 (23) I hereby certify that I attended the birth of this child, who was born alive at 9 P. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(24) (Signature) Jane Jenkins (25) Address of Physician or Midwife Johns Island
 (26) State whether midwife

Given name added from a companion- and report
 (27) Witness Mr. J. H. Hills
 (28) Filed Feb 28 1913 (29) Mrs. J. H. Hills
 (30) Local Registrar

When this was an 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.