

Form No. 1

(1) PLACE OF BIRTH

County of

Township of

or

Inc. Town of

or

City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

Registration District No.

File No.—For State Registrar Only

31620

Registered No. 88
(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 Harvey Zeigler If child is not yet named, make supplemental report as directed(3) SEX OR GIRL Boy (4) Twin one or Triplet? one (5) Number in order of birth one (6) Are any Parents Married? yes (7) DATE OF BIRTH Sept. 12, 1928
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME James Zeigler(9) PRESENT POSTOFFICE OF FATHER Elloree SC(10) COLOR OR RACE color (11) AGE AT LAST BIRTHDAY 25 (Years)(12) BIRTHPLACE C. D. Zeigler Co. SC(13) OCCUPATION Farmer(20) Number of children born to mother, including present birth 3 head

MOTHER.

(14) NAME BEFORE MARRIAGE Charvey Audin(15) PRESENT POSTOFFICE OF MOTHER Elloree SC(16) COLOR OR RACE color (17) AGE AT LAST BIRTHDAY 17 (Years)(18) BIRTHPLACE F. F. Felder Grangey Co. SC(19) OCCUPATION Farmer(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 4 P. M. on the date above stated. (Born alive or stillborn) (Hour P. M. or P. M.)(23) (Signature) Zelia Jackson(24) State whether Physician or Midwife midwife(25) Address of Physician or Midwife Elloree SC

Given name added from a supplemental report

(26) Witness Rebecca Audin

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

(27) Filed Sept 15, 1928 (28) Local Registrar [Signature]

*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.