

(1) PLACE OF BIRTH

County of LexingtonSTATE OF SOUTH CAROLINA.
Bureau of Vital Statistics
State Board of Health

FILE NO.—For State registration only

46825

Township of

Inc. or Town of Batesburg

City of

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

Registration District No. 31-ARegistered No. 67

(For use of Local Registrar)

(2) Full Name of Child Margie Lurine Hallman

If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Girl

(4) Twin or Triplet?

(5) Number in order of birth

(6) Are Parents Married? yes

(7) DATE OF BIRTH

Jun. 7, 1916

Is he assured only in case of 1 twin or triplet?

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Casper W Hallman(9) PRESENT POSTOFFICE OF FATHER Batesburg(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 31 (Years)(12) BIRTHPLACE Lexington(13) OCCUPATION merchant(20) Number of children born to mother, including present birth 3

MOTHER.

(14) NAME BEFORE MARRIAGE Lulu May Agbran(15) PRESENT POSTOFFICE OF MOTHER Batesburg S.C.(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 24 (Years)(18) BIRTHPLACE Aiken S.C.(19) OCCUPATION Housewife(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 Born Alive 8 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) S. J. Atkinson

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Batesburg, S.C.

Given name added from a supplemental report

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

(27) Filed Jun 21, 1916 (28) S. J. Atkinson 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.

Registrar I

Local Registrar

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N. H.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the FIRST-BORN. No. 1. THE OTHER. No. 2, etc., in question 5.

N. H.—McCaw of Columbia

W. H.—McCaw

McCaw