

THIS IS A PERMANENT RECORD. 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.

(1) PLACE OF BIRTH

County of Richland

Township of .....

or Inc. Town of .....

City of Columbia S.C.

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

CERTIFICATE OF BIRTH

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

File No. - For State Registrar Only

12578

Registration District No. 382 Registered No. 1262  
(For use of Local Registrar)

(No. 23 of Union St.; ..... Ward)

(2) Full Name of Child Annie Elizabeth Huggins child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Girl (4) Twin or Triplet? X (5) Number in order of birth X (6) Are Parents Married? Yes (7) DATE OF BIRTH Feb. 23 1932  
(Name of Month) (Day) (Year)

FATHER

(8) FULL NAME Hugh Heasley Huggins (14) NAME BEFORE MARRIAGE Annie Compton

(9) PRESENT POSTOFFICE OF FATHER Columbia S.C. (15) PRESENT POSTOFFICE OF MOTHER Columbia S.C.

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 64 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 25  
(Year) (Year)

(12) BIRTHPLACE S.C. (18) BIRTHPLACE S.C.

(13) OCCUPATION Blacksmith (19) OCCUPATION Housewife

(20) Number of children born to mother, including present birth 3 (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 at 9 P. M. on the date above stated. (Born alive or stillborn) (Hour M. or P. M.)

(23) (Signature) Jack Munhead (24) State whether Physician or Midwife (25) Address of Physician or Midwife Columbia S.C.

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when questioned)

(27) Filed 4-13 1932 (28) 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.

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