

(1) PLACE OF BIRTH

County of Harney
 Township of Beaufort
 or
 Inc. Town of
 or
 City of

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

19003

Registration District No. 25-00 Registered No. 31
 (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 Harvey Wallace Lewis If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH 1900 12 22
 (Name of Month) (Day) (Year)

FATHER		MOTHER	
(8) FULL NAME	<u>L. J. Lewis</u>	(14) NAME BEFORE MARRIAGE	<u>Myrtle Martin</u>
(9) PRESENT POSTOFFICE OF FATHER	<u>Salinas Ferry</u>	(15) PRESENT POSTOFFICE OF MOTHER	<u>Salinas Ferry</u>
(10) COLOR OR RACE	<u>White</u>	(16) COLOR OR RACE	<u>White</u>
(11) AGE AT LAST BIRTHDAY	<u>28</u> (Years)	(17) AGE AT LAST BIRTHDAY	<u>27</u> (Years)
(12) BIRTHPLACE	<u>Harney Co.</u>	(18) BIRTHPLACE	<u>Beaufort Co.</u>
(13) OCCUPATION	<u>Farmer</u>	(19) OCCUPATION	<u>Housewife</u>
(20) Number of children born to mother, including present birth	<u>4</u>	(21) Number of children of this mother now living, including present birth	<u>4</u>

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Alive at 2-30 p.m. on the date above stated.
 (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) H. E. Bell
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife Beaufort

Given name added from a supplemental report

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

(27) Filed Jan 21 1901 (28) H. E. Bell 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.