

(1) PLACE OF BIRTH

County of Charlotte
 Township of Lincolnton
 or
 Inc. Town of Concord
 or
 City of Concord

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

18029

Registration District No. 14-23 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 Haris Chance Humphris If child is not yet named, make supplemental report as directed

3) BOY OR GIRL

boy

(4) Twin or Triplet

To be answered only in event of Twins or Triplets

(5) Number in order of birth

6

(6) Are Parents Married?

yes

(7) DATE OF

BIRTH

June 30, 1922

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Haris Chance Humphris

(9) PRESENT POSTOFFICE OF FATHER

Islington 39

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

39

(12) BIRTHPLACE

Spartanburg Co. S.C.

(13) OCCUPATION

Farmer

MOTHER.

(14) NAME BEFORE MARRIAGE

Beulah L. McCreary

(15) PRESENT POSTOFFICE OF MOTHER

Islington

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

33

(18) BIRTHPLACE

Spartanburg Co. S.C.

(19) OCCUPATION

LL. Director

(20) Number of children born to mother, including present birth

6

(21) Number of children of this mother now living, including present birth

4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 9:30 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

(26) Witness

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

(27) Filed

July 10, 1922

(28)

H. P. Bitchard

Local Registrar

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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