

## 1. PLACE OF BIRTH

County of

Township of

or  
Ins. Town ofor  
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

44844

Registered No.

(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

Eben Wilson

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

3. SEX  
GIRL4. Twin or  
Triplet?5. Number in order  
of birth6. Are  
Parents  
Married?

7. DATE OF BIRTH

(Name of Month)

(Day)

(Year)

To be answered only in event of Twins or Triplets

## FATHER

8. FULL  
NAME9. PRESENT  
POSTOFFICE  
OF FATHER10. COLOR  
OR  
RACE11. AGE AT LAST  
BIRTHDAY

12. BIRTHPLACE

13. OCCUPATION

14. Number of children born to  
mother, including present birth

## MOTHER

14. NAME BEFORE  
MARRIAGE15. PRESENT  
POSTOFFICE  
OF MOTHER16. COLOR  
OR  
RACE17. AGE AT LAST  
BIRTHDAY

18. BIRTHPLACE

19. OCCUPATION

20. Number of children of this mother  
now living, including present birth

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

22. I hereby certify that I attended the birth of this child, who was  
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

19

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 4th month of pregnancy.

MARGIN RESERVED FOR BINDING

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.  
N.B.—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.

LAST ISSUED JANUARY 1914.