

(1) PLACE OF BIRTH
 County of Charleston
 Township of Charleston
 or
 Inc. Town of
 or
 City of (No. St.; Ward)
 (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
25363

Registration District No. 11A Registered No. 74
 (For use of Local Registrar)
 2) Full Name of Child Hattie L. Meadows } 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? No (7) DATE OF BIRTH Aug. 10, 1911
To be answered only in case of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME Tracy Meadows
 (9) PRESENT POSTOFFICE OF FATHER R.F.D. #1 Camp Hill / Francis, N.C.
 (10) COLOR OR RACE Col. (11) AGE AT LAST BIRTHDAY 18 (Years)
 (12) BIRTHPLACE Augusta, Ga.
 (13) OCCUPATION Laborer
 (20) Number of children born to mother, including present birth 1

MOTHER.
 (14) NAME BEFORE MARRIAGE Sarah W. Clarke
 (15) PRESENT POSTOFFICE OF MOTHER Charleston S.C.
 (16) COLOR OR RACE Col. (17) AGE AT LAST BIRTHDAY 17 (Years)
 (18) BIRTHPLACE Charleston S.C.
 (19) OCCUPATION House work
 (21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 8:30 A.M. on the date above stated. (Born alive or stillborn) (Hour, A. M. or P. M.)

(23) (Signature) Archie Barber
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Charleston S.C.

Given name added from a supplemental report
 191.....
 Registrar

(26) Witness E. C. Allen, W. C. ...
 (Signature of Witness necessary only when question 23 is signed by mark)
 (27) Filed Aug 11, 1911 (28) Archie Barber 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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