

(1) PLACE OF BIRTH

County of CharlestonTownship of Charlestonor Inc. Town of CharlestonCity of Charleston

(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

17897

Registration District No. 9ARegistered No. 879

(For use of Local Registrar)

(2) Full Name of Child Margaret Mabel Garrison

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

(3) BOY OR GIRL G.

(4) Twin or Triplet?

(5) Number in order of birth

(6) Are Parents Married? yes.

(7) DATE OF BIRTH

June 6th 1922
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Milton Miller Garrison

(9) PRESENT POSTOFFICE OF FATHER

Charleston S.C.

(10) COLOR OR RACE

W.

(11) AGE AT LAST BIRTHDAY

29
(Years)

(12) BIRTHPLACE

Cherokee Co S.C.

(13) OCCUPATION

Material Supt New York

MOTHER.

(14) NAME BEFORE MARRIAGE

Mamie Kaysla Matthews

(15) PRESENT POSTOFFICE OF MOTHER

Charleston S.C.

(16) COLOR OR RACE

W.

(17) AGE AT LAST BIRTHDAY

30
(Years)

(18) BIRTHPLACE

Charleston S.C.

(19) OCCUPATION

Housewife

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

5

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

5

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Alive at 8 PM 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

6/12/22

(28)

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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