

FORM NO. 3.

(1) PLACE OF BIRTH

County of

Township of

or

Inc. Town of

or

City of

(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

49139

Registration District No. 2126

Registered No. 6

(For use of Local Registrar)

St.; Ward)

(2) Full Name of Child

Richard Alexander Harvith

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) Are Parents Married?

Yes

(7) DATE OF BIRTH

Jan. 27, 1916

(Name of Month) (Day) (Year)

FATHER.

(6) FULL NAME

Edward Harvith

(9) PRESENT POSTOFFICE OF FATHER

Brook Green, S. C.

(10) COLOR OR RACE

Negro

(11) AGE AT LAST BIRTHDAY

28

(Years)

(12) BIRTHPLACE

South Carolina

(13) OCCUPATION

Farmer

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

15

MOTHER.

(14) NAME BEFORE MARRIAGE

Harvith Washington

(15) PRESENT POSTOFFICE OF MOTHER

Brook Green, S. C.

(16) COLOR OR RACE

Negro

(17) AGE AT LAST BIRTHDAY

26

(Years)

(18) BIRTHPLACE

South Carolina

(19) OCCUPATION

Farm hand

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

12

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive or stillborn, at 12 P. M. on the date above stated.

(23) (Signature)

James Harvith

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Midwife Waverly Mills, S. C.

(Given name added from a supplemental report)

191

Registrar

(26) Witness

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

(27) Filed

Feb. 10, 1916

(28)

Debbie Jackson

Special 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.

MAKING HIGH-REPRODUCIBLE PRINTING.
 WHITE 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 6.

McCaw of Columbia