

MARGIN RESERVED FOR BINDING.  
WRITED 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 make the PRINT-BOUN. No. 1, THE OTHER, No. 2, etc., in question 5.

RECEIVED OF COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of .....  
or  
Township of .....  
or  
Inc. Town of .....  
or  
City of Chas.

(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

Registration District No. 9 A Registered No. 1977  
(For use of Local Registrar)

File No. For State Registrar Only  
41318

(2) Full Name of Child Louisa Hamilton

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

3) BOY OR GIRL? GIRL? (4) Twin or Triplet? To be answered only in case of Twins or Triplets (5) Number in order of birth 1 (6) Are Parents Married? no (7) DATE OF BIRTH Dec. 11, 1922  
(Name of Month) (Day) (Year)

FATHER.

8) FULL NAME Wm. Hamilton  
9) PRESENT POSTOFFICE OF FATHER Chas. S.C.  
10) COLOR OR RACE C. (11) AGE AT LAST BIRTHDAY 20 (Years)  
12) BIRTHPLACE S.C.  
13) OCCUPATION Laborer  
20) Number of children born to mother, including present birth 1

MOTHER.

14) NAME BEFORE MARRIAGE Henrietta Edwards  
15) PRESENT POSTOFFICE OF MOTHER Chas.  
16) COLOR OR RACE C. (17) AGE AT LAST BIRTHDAY 17 (Years)  
18) BIRTHPLACE S.C.  
19) OCCUPATION Dom.  
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 Alive at 5 P.M., on the date above stated. (Born alive or stillborn; (Hour A. M. or P. M.)

(23) (Signature) Maggie Reid  
(24) State whether Physician or Midwife M. D. (25) Address of Physician or Midwife 73 Montague St.

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark) Green  
(27) Filed 12/15/22 (28) J. Menden Local Registrar

\*When there was no attending physician or midwife, then the father, household, 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.

STATE OF SOUTH CAROLINA)  
COUNTY OF CHARLESTON)

Personally appeared before me a Notary Public of South Carolina  
HENRIETTA DAVIS who being duly sworn deposes and says: that she  
is the mother of Louisa Hamilton, born December 11, 1922 birth  
record # 119/1977 in the Charleston Health Department: that the  
midwife, Maggie Reid duly reported this record but made a mistake  
in the maiden name of the Mother and that this should appear as  
HENRIETTA ELLIOTT instead of Henrietta Edward: that the above is a  
true and correct statement of fact and that she wishes this correction  
to appear on the original record.

(her mark)

Henrietta Davis

26 President St.

Sworn to and subscribed before me

this the 30th day of July 1940

Emma P. Reginald  
Notary Public, S.C.

Witnessed:

M. L. Mord  
Thompson

Notary Public S. C. my commission  
expires at the pleasure of the Governor