

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 use PRINT-BOOK, No. 1. THE OTHER, No. 2, etc., in question 5.

(1) PLACE OF BIRTH

County of

Township of

or

Inc. Town of

or

City of Chas......

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
 Bureau of Vital Statistics
 State Board of Health

File No. For State Registrar Only

41318

Registration District No. 9 A Registered No. 1977

(For use of Local Registrar)

(2) Full Name of Child Louisa Hamilton

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

3) BOY OR GIRL? <u>GIRL</u>	4) Twin or Triplet? <u>To be answered only in event of Twins or Triplets</u>	5) Number in order of birth <u>20</u>	6) Are Parents Married? <u>no</u>	7) DATE OF BIRTH <u>Dec. 11, 1922</u> (Name of Month) (Day) (Year)
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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 Elizeth Henrietta Edward

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

(25) Address of Physician or Midwife

M. R. 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. Mercier 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 Fitzgerald
Notary Public, S.C.

Witnessed:

M. L. Boyd
Thompson

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

RECORDED

pregnancy