

(1) PLACE OF BIRTH

County of Greenville
 Township of Bates
 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

13781

Registration District No. 2201 Registered No. 37
 (For use of Local Registrar)

St.; Ward)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Henry M. Hodgins, Jr. If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Boy (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? Yes (7) DATE OF BIRTH June 4, 1913
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME H. M. Hodgins
 (9) PRESENT POSTOFFICE OF FATHER London Post St.
 (10) COLOR OR RACE W (11) AGE AT LAST BIRTHDAY 36 (Years)
 (12) BIRTHPLACE W. C.
 (13) OCCUPATION Preacher
 (14) Number of children born to mother, including present birth 4

MOTHER.

(14) NAME BEFORE MARRIAGE Emily Cunningham
 (15) PRESENT POSTOFFICE OF MOTHER London
 (16) COLOR OR RACE W (17) AGE AT LAST BIRTHDAY 30 (Years)
 (18) BIRTHPLACE W. C.
 (19) OCCUPATION Housewife
 (20) Number of children of this mother now living, including present birth 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

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

(23) (Signature) E. C. Cunningham
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife W. C.

Given name added from a supplemental report

See affidavit
5/4/13
R. H. Registrar

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

(27) Filed July 1, 1913 (28) Dr. Stroud 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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