

## (1) PLACE OF BIRTH

County of Berkeley  
 or  
 Township of Constance  
 or  
 Inc. Town of .....  
 or  
 City of .....

## CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

88604

Registration District No. 798 Registered No. 272  
 (For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)  
 (No. .... St.; .... Ward)

(2) Full Name of Child Helen Cecil Hugue

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

(3) ~~BOY OR~~ GIRL? (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? Yes (7) DATE OF BIRTH Dec 11<sup>th</sup> 1916  
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME L. A. Hugue

(9) PRESENT POSTOFFICE OF FATHER Ferguson S.C.

(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 49  
 (Years)

(12) BIRTHPLACE Belmont

(13) OCCUPATION Farming

(20) Number of children born to mother, including present birth 5

## MOTHER.

(14) NAME BEFORE MARRIAGE Marrie Richardson

(15) PRESENT POSTOFFICE OF MOTHER Ferguson S.C.

(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 26  
 (Years)

(18) BIRTHPLACE Walnut Grove

(19) OCCUPATION Housewife

(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 born alive at 12 M.,  
 on the date above stated. (Normally or stillborn) (Hour A. M. or P. M.)

(23) (Signature) L. L. Richardson

(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Ferguson S.C.

Given name added from a supplemental report

(26) Witness J. M. Cross  
 (Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed Dec 20<sup>th</sup> 1916 (28) L. L. Cross  
 Registrar 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.

RECEIVED BY COLUMBIA, COLUMBIA, S. C.