

## (1) PLACE OF BIRTH

County of Charleston S.C. **CERTIFICATE OF BIRTH**  
 STATE OF SOUTH CAROLINA.  
 Bureau of Vital Statistics  
 State Board of Health

Township of .....

Inc. Town of ..... Registration District No. 91A Registered No. 11368  
 or ..... (For use of Local Registrar)  
 City of Charleston S.C. No. 25 Pitt St. 4 Ward  
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Julia G. Austin If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL girl (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Dec 5 1916  
 (Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Daniel Austin  
 (9) PRESENT POSTOFFICE OF FATHER Charleston S.C.  
 (10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 37 (Years)  
 (12) BIRTHPLACE Georgetown S.C.  
 (13) OCCUPATION Laborer  
 (14) Number of children born to mother, including present birth Five

## MOTHER.

(14) NAME BEFORE MARRIAGE Lucy Dewine  
 (15) PRESENT POSTOFFICE OF MOTHER Charleston S.C.  
 (16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 32 (Years)  
 (18) BIRTHPLACE Kingstree S.C.  
 (19) OCCUPATION House Keeper  
 (21) Number of children of this mother now living, including present birth Two

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Born alive at 5:45 P.M. on the date above stated.  
 (Born alive or stillborn) (How A. M. or P. M.)

(23) (Signature) Eliza J. Muller  
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife  
M.M. 69 Loring St.

Given name added from a supplemental report

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

(27) Filled 17/7 (28) 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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