

Form No 1.

## (1) PLACE OF BIRTH

County of LeeTownship of Stotesburg

Inc. Town of .....

City of .....

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

(2) Full Name of Child Belton Eugene HallFile No. — For State Registrar Only  
46764

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

Registration District No. 3008Registered No. 2

(For use of Local Registrar)

(No. Hopkins)

St.; ..... Ward)

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 1(6) Are Parents Married? Yes

(7) DATE OF BIRTH

Jan. 1, 1916

(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME James Hall(9) PRESENT POSTOFFICE OF FATHER McBee, S.C.(10) COLOR OR RACE white(11) AGE AT LAST BIRTHDAY 30 (Years)(12) BIRTHPLACE Charleston, S.C.(13) OCCUPATION Horse trader(20) Number of children born to mother, including present birth 1

## MOTHER.

(14) NAME BEFORE MARRIAGE Estelle Hopkins(15) PRESENT POSTOFFICE OF MOTHER Bishopville, S. C., E.C.(16) COLOR OR RACE white(17) AGE AT LAST BIRTHDAY 18 (Years)(18) BIRTHPLACE Charleston, S.C.(19) OCCUPATION House girl(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 11 30 P M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) C. H. Pace(24) State whether Physician or Midwife (25) Address of Physician or Midwife Physician Bishopville, S. C., E.C.

Given name added from a supplemental report

(26) Witness

(Signature of Witness necessary only when question 22 is signed by mark)

(27) Filed Jan 2, 1916

(28)

C. H. Pace Local RegistrarMARGIN RESERVED FOR BINDING.  
WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.

M. R.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the FIRST-BORN No. 1, THE OTHER, No. 2, etc., in question 5.

Caw. of Columbia

\*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.