

(1) PLACE OF BIRTH

County of Hampden
 Township of Walter

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics
 State Board of Health

File No. — For State Registrar Only
30623

Inc. Town of Gafford S.C. Registration District No. 244 Registered No. 123
 (For use of Local Registrar)
 City of Gafford S.C. (No. 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 Marnie Hobson 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 2 (6) Are Parents Married? yes (7) DATE OF BIRTH Sept 12, 1922
 To be answered only in event of Twin or Triplet (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Edward Hobson
 (9) PRESENT POSTOFFICE OF FATHER Gafford S.C.
 (10) COLOR OR RACE colored (11) AGE AT LAST BIRTHDAY 23 (Years)
 (12) BIRTHPLACE Gafford S.C.
 (13) OCCUPATION Farmer
 (22) Number of children born to mother, including present birth 2

MOTHER.

(14) NAME BEFORE MARRIAGE Bertha Sammel
 (15) PRESENT POSTOFFICE OF MOTHER Gafford S.C.
 (16) COLOR OR RACE colored (17) AGE AT LAST BIRTHDAY 19 (Years)
 (18) BIRTHPLACE Gafford S.C.
 (19) OCCUPATION House keeper
 (21) Number of children of this mother now living, including present birth 7

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(22) I hereby certify that I attended the birth of this child, who was alive at 4:0 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)
 (23) (Signature) E. M. Hifford Gafford S.C.
 (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Gafford S.C.

Given name added from a supplemental report

(26) Witness Charlton Sammel
 (Signature of Witness necessary only when question 23 is signed by mark)
 (27) Date 9.15.22 (28) J. C. S. Schemm 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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W. P. Allen