

THIS IS A PERMANENT RECORD.
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.
RECEIVED OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Allendale Co.
Township of Sixty-third
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
28641

Registration District No. Registered No. 42
(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 George Rubben Harter If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Sept 19 1922
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME George W. Harter
(9) PRESENT POSTOFFICE OF FATHER Wm. S. C. B. 2d
(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 30
(Years)
(12) BIRTHPLACE Barnwell Co.
(13) OCCUPATION Farming
(20) Number of children born to mother, including present birth 3

MOTHER.

(14) NAME BEFORE MARRIAGE Siemie Ann R. Craft
(15) PRESENT POSTOFFICE OF MOTHER Wm. S. C. B. 2d
(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 31
(Years)
(18) BIRTHPLACE Barnwell Co.
(19) OCCUPATION Housekeeping
(21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 2 P. M.
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) G. W. J. Roadhock, M.D.
(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Trainer, S. C.

Given name added from a supplemental report

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

(27) Filed Sept 19 1922 (28) G. W. J. Roadhock, M.D.
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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