

Form No. 3

## (1) PLACE OF BIRTH

County of Beaufort  
 Township of Wrightsville  
 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

4775

Registration District No. 3.5.15Registered No. 25  
(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 Hellen Meneis Wilson If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Girl (4) Twin or Triplet ..... (5) Number in order of birth ..... (6) Are Parents Married? Yes (7) DATE OF BIRTH 2-25-23  
 To be answered only in event of Twin or Triplet (Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Arthur Wilson  
 (9) PRESENT POSTOFFICE OF FATHER Wrightsville  
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 20  
 (12) BIRTHPLACE Beaufort Co  
 (13) OCCUPATION Pressing  
 (20) Number of children born to mother, including present birth 1

## MOTHER.

(14) NAME BEFORE MARRIAGE Namie Higgins  
 (15) PRESENT POSTOFFICE OF MOTHER Wrightsville  
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 20  
 (18) BIRTHPLACE Beaufort Co  
 (19) OCCUPATION Housekeeper  
 (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 at 6 a.m. on the date above stated. (Born alive or stillborn) (Sign A. M. or P. M.)

(23) (Signature) Dr. Hall

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

(Given name added from a supplemental report)

(26) Witness

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

(27) Filed 3-2-23(28) 12-1-23 Local Registrar

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.

Beaufort Co. Columbia, S. C.