

Form No. 1.

MARGIN RESERVED FOR BINDING.

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.  
N. B.—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.

MOGAW OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Sumter

Township of Mayeville

or

Inc. Town of .....

or

City of .....

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

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

87596

Registration District No. 4102

Registered No. 136  
(For use of Local Registrar)

(2) Full Name of Child

Haller Harrington

(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

Nov 29, 1916  
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Elijah Harrington

(9) PRESENT POSTOFFICE OF FATHER

Mayeville S.C.

(10) COLOR OR RACE

Negro

(11) AGE AT LAST BIRTHDAY

22  
(Years)

(12) BIRTHPLACE

Atkins S.C.

(13) OCCUPATION

Saw mill Hand

(20) Number of children born to mother, including present birth

2

MOTHER.

(14) NAME BEFORE MARRIAGE

Linda Burgess

(15) PRESENT POSTOFFICE OF MOTHER

Mayeville S.C.

(16) COLOR OR RACE

Negro

(17) AGE AT LAST BIRTHDAY

20  
(Years)

(18) BIRTHPLACE

S.C.

(19) OCCUPATION

House wife

(21) Number of children of this mother now living, including present birth

2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was Alive at 7 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

Sella Haurie

(24) State whether Physician or Midwife

Midwife

(25) Address of Physician or Midwife

Mayeville 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

Dec 10, 1916

(28)

W. G. Thomas

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.