

## (1) PERSON OF BIRTH

County of Charleston

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Register Only

27449

Township of .....

or

Inc. Town of .....

or

City of Charleston

Registration District No. ....

Registered No. ....

(For use of Local Registrar)

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

(No. Barnwell Highway)

St. .... Ward

(2) Full Name of Child Dorothy Ruth Blitch

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

(6) Are Parents Married?

(7) DATE OF BIRTH

(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME

Mr. Herman B. Blitch

(9) PRESENT POSTOFFICE OF FATHER

Charlotte N.C.

(10) COLOR OR RACE

white

(11) AGE AT LAST BIRTHDAY

27 (Years)

(12) BIRTHPLACE

Barnwell Highway

(13) OCCUPATION

of the metal company

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

1

## MOTHER.

(14) NAME BEFORE MARRIAGE

Dorothy Stillman

(15) PRESENT POSTOFFICE OF MOTHER

Charlotte N.C.

(16) COLOR OR RACE

white

(17) AGE AT LAST BIRTHDAY

24 (Years)

(18) BIRTHPLACE

Charlotte Highway

(19) OCCUPATION

housewife

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

1

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(22) (Signature) .....

(23) Is the Physician or Midwife? (Address of Physician or Midwife)

Physician 811 ...

Given name added from a supplemental report

(24) Witness .....

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

(25) Filed 9/15/23H. W. Green Jr.

Registrar

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.