

16 093395

FILE No.—For State Registrar Only

0125

1. PLACE OF BIRTH

County of ClarendonTownship of Calvaryor
Inc. Town of Pinewood

City of

Standard Certificate of Birth

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics
State Board of HealthRegistration District No. 1301 Registered No. 60
(For use of Local Registrar)(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 Sara Richbourg Coulette / If child is not yet named, make supplemental report as directed.3. Boy or Girl girl If Plural births 4. Twin, triplet or other 5. Number, in order of birth 6. Premature Full term 7. Are Parents Married? yes 8. Date of birth Dec 31, 1916.
(Month, day, year)9. Full name J. H. Coulette FATHER18. Name before marriage Ethel Richbourg MOTHER10. Residence (mailing address) Pinewood, S.C.
(If non-resident, give place and State)19. Residence (mailing address) Pinewood, S.C.
(If non-resident, give place and State)11. Color or race White 12. Age at last birthday 26 (Years)20. Color or race White 21. Age at last birthday 25 (Years)13. Birthplace (city or place) Pinewood, S.C.
(State or country)22. Birthplace (city or place) Pinewood, S.C.
(State or country)14. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc. Farmer23. Trade, profession, or particular kind of work done, as house-keeper, typist, nurse, clerk, etc. Domestic

15. Industry or business in which work was done, as silk mill, sawmill, bank, etc.

24. Industry or business in which work was done, as own home, lawyer's office, silk mill, etc.

16. Date (month and year) last engaged in this work 17. Total time (years) spent in this work 19.....

25. Date (month and year) last engaged in this work 26. Total time (years) spent in this work 19.....

27. Number of children of this mother (At time of birth and including this child) 5 (a) Born alive and now living (b) Born alive but now dead (c) Stillborn

28. If stillborn, period of gestation { months weeks } 29. Cause of stillbirth { Before labor During labor

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was born alive at m. on the date above stated.
(Born alive or stillborn)

(When there was no attending physician or midwife, then the father, householder, etc., should make this return.)

Given name added from
a supplementary report
(Date of)

(Signed), M.D.

or Margaret M. Faddin Midwife.Address Sunborton, S.C.Filed Sept 16, 1939 Bessie DesChamps
Registrar.

Registrar.

MARGIN RESERVED FOR BINDING

WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD
N. B.—In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each, in order of birth, stated.

(See instructions on Back of Certificate)