

(1) PLACE OF BIRTH

County of Anderson
 Township of Wichita
 or
 Inc. Town of.....
 or
 City of.....

CERTIFICATE OF BIRTH
 STATE OF SOUTH CAROLINA
 BUREAU OF VITAL STATISTICS
 State Board of Health

Registration District No. 3 BRegistered No. 82
(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 Dorris Smith If child is not yet named, make provisional report as directed

(3) SEX OR Boy (4) Type of Free (5) Number in order of birth 2nd (6) Date of birth Nov. 12, 1923
 Is it necessary to state of Twin or Triplet

FATHER.
 (7) FULL NAME Gus Smith
 (8) PRESENT ADDRESS OF FATHER Piedmont
 (9) COLOR OR RACE color (10) AGE AT LAST BIRTHDAY 39
 (11) BIRTHPLACE Brish Creek
 (12) OCCUPATION Farming
 (13) Number of children born to mother, including present one 10

MOTHER.
 (14) NAME BEFORE MARRIAGE Essie Benson
 (15) PRESENT ADDRESS OF MOTHER Piedmont
 (16) COLOR OR RACE Color (17) AGE AT LAST BIRTHDAY 34
 (18) BIRTHPLACE Brish Creek
 (19) OCCUPATION House Keeping
 (20) Number of children of this mother now living, including present one 10

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(22) (Signature) M. T. H.
 (23) State whether Physician or Midwife Midwife (24) Address of Physician or Midwife Mattie Richardson

Given name added from a supplemental report

(25) Witness (Signature of Witness necessary only when question 21 is signed by mother)
Nov. 26, 1923 (26) M. J. Fleming
 (27) Place

When there was no attending physician or midwife, then the father, householder, etc., should report.
 If a child breathes even once, it must not be reported as stillborn. No report is necessary before the birth month of pregnancy.