

(1) PLACE OF BIRTH

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

No. for State Registrar Only

126254

County of Anderson

Township of South

Inc. Town of

Registration District No. 210

Registered No. 1
(For use of Local Registrar)

City of

(No. 210) 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 Richard Paul Jennings

(If child is not yet named, make supplemental report as directed)

(3) Sex or Color <u>Male</u>	(4) Twin or Triplet To be answered only in event of Twin or Triplet	(5) Number in order of birth	(6) Age Person Marrying <u>30</u>	(7) DATE OF BIRTH <u>May 20 23</u> (Name of Month) (Day) (Year)
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FATHER.

(8) FULL NAME A. H. Jennings

(9) PRESENT POST OFFICE OF FATHER Raymond St

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 37 (Years)

(12) BIRTHPLACE Raymond St

(13) OCCUPATION San Mill Laborer

(14) Number of children born to mother, including present birth 7

MOTHER.

(14) NAME BEFORE MARRIAGE Emma Stanley

(15) PRESENT POST OFFICE OF MOTHER Raymond St

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 23 (Years)

(18) BIRTHPLACE Raymond St

(19) OCCUPATION Housewife

(20) Number of children of this mother now living, including present birth 7

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Male at 3 P. M. on the date above stated. (Born, alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Beulah Moore
(24) State whether Physician or Midwife
(25) Address of Physician or Midwife Raymond St

Given name added from a supplemental report
..... 19 ..
Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed May 10 19 23 (28) Paul Miller 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.

Register of Columbia, Columbia, S. C.