

(1) PLACE OF BIRTH

County of

Township of

In Town of

City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics
State Board of Health

File No.—For State Registrar Only

3947

Registration District No.

22 A

Registered No.

(For use of Local Registrar)

No. 1526

Pinebladen

St. 3 Ward

2) Full Name of Child

Kathern Carston Riddle

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

Sex

Girl

(4) Twin or triplet?

(5) Number in order of birth

(6) Are Parents Married?

Yes

(7) DATE

BIRTH

(Name of Month) (Day) (Year)

FATHER.

NAME

Jollie Lee Riddle

PRESENT PLACE OF RESIDENCE

Grumder S.C.

COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

93

(Years)

BIRTHPLACE

Gastonia N.C.

OCCUPATION

Travelling Salesman

(14) NAME BEFORE MARRIAGE

Hughie Carston

(14) PRESENT POSTOFFICE OF MOTHER

Grumder S.C.

(15) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

91

(Years)

(18) BIRTHPLACE

Grumder S.C.

(19) OCCUPATION

House wife

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

1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was born at 2:40 P.M. (Born alive or stillborn) (Hour A. M. or P. M.)

(32) (Signature)

D. J. Johnson

(34) State whether Physician or Midwife

(35) Address of Physician or Midwife

When name added from a supplementary report

(36) Witness

(Signature of Witness necessary only when question 35 is signed by mark)

J. E. Smith

(37) Local Registrar

When there was no attendance of physician or midwife, then the father, householder, etc., should make this return. If a child breathes even once it is not stillborn. No report is desired of stillbirths before the full month of pregnancy.