

MARGIN RESERVED FOR BINDING.
WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the FIRST-BORN, No. 1, THE OTHER, No. 2, etc., in question 5.

(1) PLACE OF BIRTH

County of Richland

Township of

OR
INC. TOWN of

City of Columbia

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

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of Health

No. 10.—For State Registrar Only

36192

Registration District No. 38a Registered No. 1806
(For use of Local Registrar)

(2) Full Name of Child

Sterling Adair Pitts Jr

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

(3) BOY OR GIRL Boy

(4) Twin or Triplet?

To be answered only in case of Twin or Triplet

(5) Number in order of birth

(6) Are Parents Married? Yes

(7) DATE OF BIRTH Oct. 13, 1927
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Sterling Adair Pitts

(9) PRESENT POSTOFFICE OF FATHER Columbia SC

(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 25 (Year)

(12) BIRTHPLACE SC

(13) OCCUPATION Telegraph Operator

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

MOTHER.

(14) NAME BEFORE MARRIAGE Kate Hargrave

(15) PRESENT POSTOFFICE OF MOTHER Columbia SC

(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 37 (Year)

(18) BIRTHPLACE SC

(19) OCCUPATION Housewife

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

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 10:30 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) B. H. Sargent M.D.

(24) State whether Physician or Midwife (25) Address of Physician or Midwife Columbia SC

Given name added from a supplemental report

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

(27) Filed 10-13-27 (28) 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.

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