

1. PLACE OF BIRTH

County of Marion
 Township of Britton Neck
 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. 3207

FILE No.—For State Registrar Only

44110Registered No. 8
(For use of Local Registrar)

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 Walter Davis

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

1. BOY OR GIRL <u>girl</u>	4. Twin or Triplet? <u>No</u>	5. Number in order of birth <u>1</u>	6. Are Parents Married? <u>No</u>	7. DATE OF BIRTH <u>Dec 28 1923</u>
To be answered only in event of Twins or Triplets				(Name of Month) (Day) (Year)

FATHER

8. FULL NAME Sherman Richardson
 9. PRESENT POSTOFFICE OF FATHER Greesham S.C.
 10. COLOR OR RACE col
 11. AGE AT LAST BIRTHDAY 28 (Years)
 12. BIRTHPLACE S.C.
 13. OCCUPATION farmer
 20. Number of children born to mother, including present birth 3

MOTHER

14. NAME BEFORE MARRIAGE Cornelia Davis
 15. PRESENT POSTOFFICE OF MOTHER Greesham S.C.
 16. COLOR OR RACE col
 17. AGE AT LAST BIRTHDAY 24 (Years)
 18. BIRTHPLACE Greesham S.C.
 19. OCCUPATION Labourer
 21. Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

22. I hereby certify that I attended the birth of this child, who was Born alive at 1 P M.
 on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)

23. Signature Fannie Smith
Greesham S.C.
 24. State whether Physician or Midwife _____ 25. Address of Physician or Midwife _____

Given name added from a supplemental report

26. Witness _____

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

27. Filed Nov 1 1924 28. W. J. Jones

19 Registrar

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