

(1) PLACE OF BIRTH

County of Sumter
 Township of Fulton
 or
 Inc. Town of
 or
 City of

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

File No.—For State Registrar Only
30400

Registration District No. 4411 ... Registered No. 37 ...
 (For use of Local Registrar)

City of (No. 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 Infant Rice ... If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL girl (4) Twin or Triplet? To be answered only in event of Twin or Triplet (5) Number in order of birth (6) Are Parents Married? yes (7) DATE OF BIRTH Sept 8 - 1923
 (Name of Month) (Day) (Year)

FATHER.		MOTHER.	
(8) FULL NAME <u>Elisha Rice</u>	(14) NAME BEFORE MARRIAGE <u>Annie Walker</u>	(15) PRESENT POSTOFFICE OF FATHER <u>Pinewood S.C.</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Pinewood S.C.</u>
(10) COLOR OR RACE <u>negro</u>	(11) AGE AT LAST BIRTHDAY <u>23</u> (Years)	(16) BIRTHPLACE <u>S.C.</u>	(17) AGE AT LAST BIRTHDAY <u>20</u> (Years)
(12) BIRTHPLACE <u>S.C.</u>	(13) OCCUPATION <u>Team driver</u>	(18) BIRTHPLACE <u>S.C.</u>	(19) OCCUPATION <u>House wife</u>
(20) Number of children born to mother, including present birth <u>1</u>	(21) Number of children of this mother now living, including present birth <u>1</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 2 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Sarah Brown
 (24) State whether Physician or Midwife mid wife (25) Address of Physician or Midwife Pinewood S.C.

Given name added from a supplemental report

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

(27) Filed Sept. 8 1923 (28) C. S. Griffin 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.