

(1) PLACE OF BIRTH

County of MarionTownship of Britton Neckor
Inc. 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

90870

Registration District No. 370 Registered No. 29

(For use of Local Registrar)

(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 Cathleen Richardson child is not yet named, make supplemental report as directed(3) BOY OR GIRL? girl

(4) Twin or Triplet?

(5) Number in order of birth

(6) Are Parents Married? yes

(7) DATE OF BIRTH

Dec 1 1917
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Barto Richardson

(9) PRESENT POSTOFFICE OF FATHER

Eulonia S.C.

(10) COLOR OR RACE

white

(11) AGE AT LAST BIRTHDAY

26
(Years)

(12) BIRTHPLACE

Marion Co.

(13) OCCUPATION

Farmer.

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

1

MOTHER.

(14) NAME BEFORE MARRIAGE

Eliza Ruth Bain

(15) PRESENT POSTOFFICE OF MOTHER

Eulonia S.C.

(16) COLOR OR RACE

white

(17) AGE AT LAST BIRTHDAY

16
(Years)

(18) BIRTHPLACE

Star N.C.

(19) OCCUPATION

Housewife

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

1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Born alive at 7:20 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) D. R. Sam

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Physician Centenary S.C.

Given name added from a supplemental report

(26) Witness

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

19
Registrar(27) Filed Jan 5 1917

(28)

W. J. Porter
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.