

County of Charleston
City of Charleston
Registration District No. 9

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

File No. — For this registration
510

Sex of Child Male Registered No. 144
City of Charleston (For use of Local Registrar)
If birth occurs in a hospital or other institution, give name of same instead of street and number.
(1) Full Name of Child Th. Annette Davis If child is not yet named, make supplemental report as directed

(2) Sex of Child Male (3) Type of Report Birth (4) Date of Birth Dec 24 1942 (5) Age of Parent 24 (6) Date of Marriage Dec 24 1942

(7) Full Name of Father St. Julian Davis (8) Name before Marriage Theresa Smiley
(9) Present Postoffice of Father Charleston S.C. (10) Present Postoffice of Mother Charleston S.C.
(11) Color or Race colored (12) Age at Last Birthday 31 (13) Color or Race Col. (14) Age at Last Birthday 27
(15) Birthplace Charleston S.C. (16) Birthplace Charleston S.C.
(17) Occupation Driver (18) Occupation Domestic
(19) Number of children born to mother, including present birth 1 alive (20) Number of children of this mother now living, including present birth 1 alive

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(21) I hereby certify that I attended the birth of this child, who was alive at 8 P. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(22) (Signature) A. M. ... (23) State whether Physician or Midwife Midwife (24) Address of Physician or Midwife P. S. Blanford St.

Given name affidavit from a supplemental report
4/13/42 M. R. Woodard, Jr. Registrar
(25) Witness ... (Signature of Witness necessary only when question 23 is signed by mark)
(26) Filed 1/27/43 (27) ...

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.