

(1) PLACE OF BIRTH

County of Richland  
Township of Spring  
or  
Inc. Town of .....

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

19194

Registration District No. 4005

Registered No. 25  
(For use of Local Registrar)

(No. ....)

St.; ..... Ward)

City of .....

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

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

(2) Full Name of Child Not Name

2 SEX OF CHILD  
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 July 16 1923  
(Month) (Day) (Year)

FATHER

3 FULL NAME

Lucian Hyatt

4 PRESENT POSTOFFICE OF FATHER

Pauline PERFD

10 COLOR OR RACE

N

(11) AGE AT LAST BIRTHDAY 25  
(Years)

12 BIRTHPLACE

SC

13 OCCUPATION

Farmer

20 Number of children born to mother, including present birth

1

MOTHER

(14) NAME BEFORE MARRIAGE

Lizzie Beaman

(15) PRESENT POSTOFFICE OF MOTHER

Pauline PERFD

(16) COLOR OR RACE

N

(17) AGE AT LAST BIRTHDAY 29  
(Years)

(18) BIRTHPLACE

SC

(19) OCCUPATION

Domestic

(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 .....

..... at 7:10 P.M.,  
(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Physician

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife  
Pauline PERFD

Give name added from a supplemental report

(26) Witness

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

(27) Filed

July 12 1923

(28)

Justa Heth  
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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