

## (1) PLACE OF BIRTH

County of Richland

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

39822

Township of .....

or  
Inc. Town of R. I. Richland Co.

or

City of .....

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

Registration District No. ....

(No. General Hospital)

St.; ..... Ward)

Registered No. ....

(For use of Local Registrar)

## 2) Full Name of Child

Tarter

If 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

To be answered only in event of Twin or Triplet.

(6) Are Parents Married? yes(7) DATE OF BIRTH June 17, 1922

(Name of Month) (Day) (Year)

## FATHER

(8) FULL NAME L. S. Tarter(9) PRESENT POSTOFFICE OF FATHER Columbia S.C. Route 3(10) COLOR OR RACE W. (11) AGE AT LAST BIRTHDAY 35 (Years)(12) BIRTHPLACE N.C.(13) OCCUPATION Farmer(14) Number of children born to mother, including present birth Seven

## MOTHER

(14) NAME BEFORE MARRIAGE Jessie Ballant(15) PRESENT POSTOFFICE OF MOTHER Columbia S.C. Route 3(16) COLOR OR RACE W. (17) AGE AT LAST BIRTHDAY 32 (Years)(18) BIRTHPLACE N.C.(19) OCCUPATION Domestic(20) Number of children of this mother now living, including present birth Eight

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(21) I hereby certify that I attended the birth of this child, who was Born alive at 10:55 P.M. on the date above stated. (Hour A. M. or P. M.)(23) (Signature) J. A. DeLoach M.D.

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

191

Registrar

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

(27) Filed 191 (28) 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.