

1) PLACE OF BIRTH

County of Richmond
 Township of Richmond
 or
 City of Richmond
 or
 Town of Richmond
 or
 City of Richmond

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

12411

Registration District No. 100 Registered No. 12411
 (For use of Local Registrar)

(No. 100 Ward 1)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number:)

2) Full Name of Child

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

BOY OR GIRL <u>Girl</u>	(4) Twin or Triplet <u>No</u>	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Jan 22 1923</u> (Name of Month) (Day) (Year)
FATHER			MOTHER	
FULL NAME <u>John P. Lee</u>			(14) NAME BEFORE MARRIAGE <u>John P. Lee</u>	
PRESENT POSTOFFICE OF FATHER <u>Richmond</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Richmond</u>	
COLOR OR RACE <u>White</u>	(11) AGE AT LAST BIRTHDAY <u>32</u> (Years)	(16) COLOR OR RACE <u>White</u>	(17) AGE AT LAST BIRTHDAY <u>32</u> (Years)	
BIRTHPLACE <u>Richmond</u>			(18) BIRTHPLACE <u>Richmond</u>	
OCCUPATION <u>Teacher</u>			(19) OCCUPATION <u>Teacher</u>	
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

I hereby certify that I attended the birth of this child, who was born alive or stillborn at Richmond M., on the date above stated. (Born alive or stillborn) Hour A. M. or P. M. 10

(20) (Signature) John P. Lee(24) State whether Physician or Midwife Physician(23) Address of Physician or Midwife Richmond

When name added from a supplemental report

(26) Witness John P. Lee

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

(27) Filed 1923

(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.