

DO NOT WRITE IN THESE SPACES. THIS IS A PERMANENT RECORD. IN CASE OF TWIN OR TRIPLETS, USE A SEPARATE BLANK FOR EACH CHILD, AND MARK IT FIRST-BORN, No. 2, 3, etc., in question 1.

(1) PLACE OF BIRTH  
County of Bamberg  
Township of 3 miles  
Inc. Town of .....  
City of .....  
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

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

Registration District No. 404 Registered No. 2  
(For use of Local Registrar)

No. 301

(2) Full Name of Child Richard S. L.  
If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL <u>Boy</u>	(4) Type or Trade <u>To be covered only in case of Trade or Trade</u>	(5) Number in order of birth <u>2</u>	(6) Sex <u>Male</u>	(7) DATE OF BIRTH <u>1-4-1923</u> (Name of Month) (Day) (Year)
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FATHER		MOTHER	
(8) FULL NAME <u>Clyde Kelly</u>	(14) NAME BEFORE MARRIAGE <u>Judie Chasman</u>		
(9) PRESENT POSTOFFICE OF FATHER <u>Richard S. L.</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Richard S. L.</u>		
(10) COLOR OR RACE <u>W</u>	(16) COLOR OR RACE <u>W</u>		
(11) AGE AT LAST BIRTHDAY <u>26</u> (Year)	(17) AGE AT LAST BIRTHDAY <u>27</u> (Year)		
(12) BIRTHPLACE <u>S. C.</u>	(18) BIRTHPLACE <u>S. C.</u>		
(13) OCCUPATION <u>mining</u>	(19) OCCUPATION <u>housewife</u>		
(20) Number of children born to mother, including present birth <u>Two</u>	(21) Number of children of this mother now living, including present birth <u>Two</u>		

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE**

(22) I hereby certify that I attended the birth of this child, who was born alive or stillborn at 10:00 P. M. on the date above stated. (Hour A. M. or P. M.)

(23) (Signature) R. S. F. Kelly  
(24) State whether Physician or Midwife  
(25) Address of Physician or Midwife  
Richard S. L.

Given name added from a supplemental report

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

(27) Filed 1-25-23 (28) R. S. F. Kelly 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.