

(1) PLACE OF BIRTH

County of Charleston
 Township of
 or
 Inc. Town of
 or
 City of Charleston
 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

File No.—For State Registrar Only

25068

Registration District No. 9.A Registered No. 1124
 (For use of Local Registrar)

(2) Full Name of Child Katherine Isabelle Beaudrot St.; Ward)
 If child is not yet named, make supplemental report as directed

(3) SEX OR GIRL? girl (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? yes (7) DATE OF BIRTH Aug 2 19 22
 (Name of Month) (Day) (Year)
 To be answered only in event of Twins or Triplets

FATHER.

(8) FULL NAME Joseph Louis Beaudrot
 (9) PRESENT POSTOFFICE OF FATHER Charleston S.C.
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 43 (Years)
 (12) BIRTHPLACE Charleston S.C.
 (13) OCCUPATION R.R. Detective
 (20) Number of children born to mother, including present birth 13

MOTHER.

(14) NAME BEFORE MARRIAGE Mary Amelia Simmons
 (15) PRESENT POSTOFFICE OF MOTHER Charleston S.C.
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 38 (Years)
 (18) BIRTHPLACE Wallerboro S.C.
 (19) OCCUPATION Domestic
 (21) Number of children of this mother now living, including present birth 7

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 9:40 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) E. L. Taylor(24) State whether Physician or Midwife (25) Address of Physician or Midwife 1800 Myrtle St.

Given name added from a supplemental report

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

(27) Filed 8/10/22 (28) James A. 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.