

(1) PLACE OF BIRTH

County of

Allendale

Township of

Bulls Pond

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

File No.—For State Registrar Only

28623

Registration District No. 4613

Registered No. 46

(For use of Local Registrar)

(2) Full Name of Child

August Riddle

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

(3) BOY OR GIRL?

Girl

(4) Twin or Triplets?

Twin

(5) Number in order of birth

(6) Are Parents Married?

Yes

(7) DATE OF BIRTH

Sept. 1

(Name of Month) (Day)

1922

FATHER.

(8) FULL NAME

Robbie Riddle

(9) PRESENT POSTOFFICE OF FATHER

Allendale Ab.

(10) COLOR OR RACE

colored

(11) AGE AT LAST BIRTHDAY

27

(Years)

(12) BIRTHPLACE

Mock Orange S.C.

(13) OCCUPATION

Farmer

MOTHER.

(14) NAME BEFORE MARRIAGE

Laurie Riddle

(15) PRESENT POSTOFFICE OF MOTHER

Allendale Ab.

(16) COLOR OR RACE

colored

(17) AGE AT LAST BIRTHDAY

22

(Years)

(18) BIRTHPLACE

Mock Orange S.C.

(19) OCCUPATION

Farmer's Wife

(20) Number of children born to mother, including present birth

3

(21) Number of children of this mother now living, including present birth

3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was

Alive

at

10 P.

M.

on the date above stated.

(23) (Signature)

Gladys Riddle

(Hour A. M. or P. M.)

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Midwife

Allendale S.C.

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

Sept 10 1922

(28)

J. A. Rouse

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.

THIS IS A PERMANENT RECORD.

In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

McClaw, of Columbia.