

THIS IS A PERMANENT RECORD  
 IF THIS IS A TRIPLT USE A SEPARATE BLANK FOR EACH CHILD, AND MARK THE  
 FIRST-BORN, NO. 1, THE OTHER, NO. 2, ETC. IN COLUMN 8.

Section of Columbia, S. C.

(1) PLACE OF BIRTH

County of Pickens Co.  
 Township of Windsor  
 Inc. Town of .....  
 City of .....

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

File No.—For State Registrar Only  
**5678**

Registration District No. 216 Registered No. 7  
 (For use of Local Registrar)

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

(2) Full Name of Child Lazza Eugene Pruitt

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

(3) BOY OR GIRL Girl (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Mar 20, 1923  
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Jam Pruitt  
 (9) PRESENT POSTOFFICE OF FATHER Windsor S.C.  
 (10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 20 (Years)  
 (12) BIRTHPLACE Pickens County S.C.  
 (13) OCCUPATION carpenter  
 (14) Number of children born to mother, including present birth 2

MOTHER.

(14) NAME BEFORE MARRIAGE Clippie Scott  
 (15) PRESENT POSTOFFICE OF MOTHER Windsor S.C.  
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 18 (Years)  
 (18) BIRTHPLACE Pickens County S.C.  
 (19) OCCUPATION House Wife  
 (20) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(21) I hereby certify that I attended the birth of this child, who was Mar 20, 1923 at Windsor S.C.  
 on the date above stated. (Born alive or stillborn) (Hour AM or P. M.)

(22) (Signature) Everett A. Stone  
 (23) State whether Physician or Midwife midwife (24) Address of Physician or Midwife Windsor S.C.

Given name added from a supplemental report

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

(26) Filed 3-30-23 (27) O. L. Weeks 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.