

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

File No.—For State Registrar Only

(1) PLACE OF BIRTH

County of Jefferson

Township of *Richfield*

Inc. Town of.....

City of
(if birth occurs in a hospital or other institution)

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

Registered No.
(For use of Local Registrar)

St.; Ward)

If child is not yet named, make

(2) Full Name of Child Mary Veronica

supplemental report as directed
DATE OF 10 17 77

(3) RAY OR NO (4) Twin X as Triplet? (5) Number in order of birth 1 (6) NO Partial Males BIRTH 11 13 (Name of Month) (Day) (Year)

To be answered only in event of Twins or Triplets

FATHER. *1st P. Darrig*

(14) NAME BEFORE MARRIAGE *Ermine Bachme*

(8) FULL NAME Walter A. DeWitt (15) PRESENT POSTOFFICE 719

(9) PRESENT POSTOFFICE OF FATHER Swansea, Ill. (17) AGE AT LAST BIRTHDAY 20

(10) COLOR OF HAIR Light (11) AGE AT LAST BIRTHDAY 29 (12) COLOR OR RACE White BIRTHDAY 10/10 (Year) 1940

(12) BIRTHPLACE LA (18) BIRTHPLACE 23019

(18) OCCUPATION General Co. S.

(13) OCCUPATION Handsewer

(21) Number of children of this mother born

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

NAME OF ATTENDING PHYSICIAN OR MIDWIFE: _____

CERTIFICATE OF ATTENDANCE

I hereby certify that I attended the birth of this child, who was _____ (Born alive or stillborn) _____ (Hour A. M. or P. M.)

(22) Thereby certifying that _____
on the date above stated.

(23) _____
(Signature)

(24) _____
(Address of Physician, in or near Milwaukee)

(24) State whether Physician or Midwife Physician

Class name added from a supplement-

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

Local Registrar

....., 19
Registrar
..... or midwife, then the father, householder, etc., should make this return as stillborn. No report is desired of stillbirths.

*When there was no attending physician, it must not be reported as a stillbirth if a child breathes even once, before the fifth month of pregnancy.

...attending physician or midwife, then the father, householder, etc., should make this report. If the child is reported as stillborn. No report is desired of stillbirths.

If a child breathes even once, it must not be reported before the fifth month of pregnancy.