

Form No. 1

(1) PLACE OF BIRTH

County of St. Charles
 Township of St. Charles
 or
 Inc. Town of
 or
 City of

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only
14876

Registration District No. 3.D.7 Registered No. 45
 (For use of Local Registrar)

City of (No. St.; Ward)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child

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

(3) BOY OR GIRL Girl (4) Twin or Triplet (5) Number in order of birth (6) Are Parents Married? yes (7) DATE OF BIRTH Feb. 20, 1923
 (Name of Month) (Day) (Year)

FATHER.

MOTHER.

(8) FULL NAME Joseph Carter
 (9) PRESENT POSTOFFICE OF FATHER St. Charles
 (10) COLOR OR RACE C (11) AGE AT LAST BIRTHDAY 28
 (Year) (12) BIRTHPLACE S.C.
 (13) OCCUPATION Laborer
 (14) Number of children born to mother, including present birth 5

(14) NAME BEFORE MARRIAGE Andrew Carter
 (15) PRESENT POSTOFFICE OF MOTHER St. Charles
 (16) COLOR OR RACE C (17) AGE AT LAST BIRTHDAY
 (Year) (18) BIRTHPLACE S.C.
 (19) OCCUPATION Laborer
 (20) Number of children of this mother now living, including present birth 5

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

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

(23) (Signature) Paul L. Guerry
 (24) State whether Physician or Midwife Mid (25) Address of Physician or Midwife St. Charles

Given name added from a supplemental report

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

(27) Filed May 30, 1923 (28) Paul L. Guerry
 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.

Form No. 1. THE OTHER, No. 2, etc., in question 1. BUREAU OF COLUMBIA, COLUMBIA, S. C.