

(1) PLACE OF BIRTH

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

390

County of Richmond
Municipality of Richmond
or
City or Town of Lone Star S.C.Registration District No. 803Registered No. 6
(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 Erskine Bonapart If child is not yet named, make supplemental report as directed(3) CHILD'S SEX Male (4) Twin or Triplet — (5) Number in order of birth 8 (6) Are Parents Married? yes (7) DATE OF BIRTH Jan 25 - 23
(Month of Month) (Day) (Year)

FATHER.

(8) FULL NAME Lewis Bonapart
(9) PRESENT POSTOFFICE OF FATHER Lone Star S.C.
(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 36 (Year)
(12) BIRTHPLACE S.C.
(13) OCCUPATION Farmer

MOTHER.

(14) NAME BEFORE MARRIAGE Eugene Gadsden
(15) PRESENT POSTOFFICE OF MOTHER Lone Star S.C.
(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 28 (Year)
(18) BIRTHPLACE S.C.
(19) OCCUPATION Housewife
(20) Number of children born to mother, including present birth 8
(21) Number of children of this mother now living, including present birth 8

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 3:30p M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Bathurine Hoover

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Lone Star S.C.

Give name added from a supplemental report

(26) Witness

Mrs. J. S. Stoddemire
(Signature of Witness necessary only when question 23 is signed by mark)(27) Filed Jan 30 - 23

(28)

J. S. Stoddemire
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.