

(1) PLACE OF BIRTH

County of Charleston

Township of

or
Inc. Town ofCity of Charleston

(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

76060

Registration District No. 9A Registered No. 1058

(For use of Local Registrar)

(2) Full Name of Child Richard Champion Davis If child is not yet named, make supplemental report as directed(3) BOY OR
GIRL?(4) Twin
or Triplet?

To be answered only in event of Twins or Triplets

(5) Number in
order of birth(6) Are
Parents
Married? yes(7) DATE OF
BIRTH 9 Sept 1916

(Name of Month) (Day) (Year)

FATHER.

(8) FULL
NAME William Alfred Davis(9) PRESENT
POSTOFFICE
OF FATHER Savannah Ga(10) COLOR
OR
RACE White (11) AGE AT LAST
BIRTHDAY 46
(Years)(12) BIRTHPLACE
Beaufort Co., S.C.(13) OCCUPATION
Broker(20) Number of children born to
mother, including present birth { 2 }

MOTHER.

(14) NAME BEFORE
MARRIAGE Ida Champion de Saunne(15) PRESENT
POSTOFFICE
OF MOTHER Savannah Ga(16) COLOR
OR
RACE White (17) AGE AT LAST
BIRTHDAY 35
(Years)(18) BIRTHPLACE
Columbia S.C.(19) OCCUPATION
Domestic(21) Number of children of this mother
now living, including present birth { 2 }

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive about 9:30 A. M.,
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Ida de Saunne(24) State whether Physician or Midwife (25) Address of Physician or Midwife
M.D. Charleston S.C.Given name added from a supplemen-
tal report

....., 191....

Registrar

(26) Witness
(Signature of Witness necessary only
when question 23 is signed by mark)(27) Filed 10/12/16 (28) J. Mercier Green M.D.
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.