

Form No. 1

(1) PLACE OF BIRTH

County of

Township of

or
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

22716

Registration District No. 4105

Registered No. 52

(For use of Local Registrar)

(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

Pauline Porter

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

(3) BOY OR GIRL

Girl

(4) Twin or Triplet

To be answered only in case of Twin or Triplet

(5) Number in order of birth

(6) Are Parents Married

yes

(7) DATE OF BIRTH

July 18, 1923

(Day of Month) (Day) (Year)

FATHER.

(8) FULL NAME

David Porter

(9) PRESENT POSTOFFICE OF FATHER

Dagell S.C.

(10) COLOR OR RACE

Cul

(11) AGE AT LAST BIRTHDAY

40

(Year)

(12) BIRTHPLACE

S.C.

(13) OCCUPATION

Farmer

(14) Number of children born to mother, including present birth

5

MOTHER.

(15) NAME BEFORE MARRIAGE

Annie Smith

(16) PRESENT POSTOFFICE OF MOTHER

Dagell S.C.

(17) COLOR OR RACE

Cul

(18) AGE AT LAST BIRTHDAY

30

(Year)

(19) BIRTHPLACE

S.C.

(20) OCCUPATION

Housewife

(21) Number of children of this mother now living, including present birth

6

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(22) I hereby certify that I attended the birth of this child, who was
on the date above stated.

(Born alive or stillborn)

(How . M. or P. M.)

(23) (Signature)

(24) State whether Physician or Midwife

Hannah Chestnut
midwife

(25) Address of Physician or Midwife

Dagell S.C.

Given name added from a supplemental report

(26) Witness

(Signature of Witness necessary only when question 22 is signed by mark)

(27) Filed

July 18, 1923

J.B. Raffield
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.