

(1) PLACE OF BIRTH

County of Sanborn
 Township of Sanborn
 or
 Inc. Town of
 or
 City of

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

No. 8700—For State Registrar Only
 (For use of Local Registrar)

Registration District No. 4114 Registered No. 7
 (For use of Local Registrar)

St.; Ward)
 (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 Charles E. Richardson If child is not yet named, make supplemental report as directed

(2) BOY OR GIRL <u>girl</u>	(4) Date of Birth <u>Feb. 2, 1923</u>	(6) Number in order of birth <u>1</u>	(8) Sex <u>Female</u>	(10) DATE OF BIRTH <u>Feb. 2, 1923</u>
FATHER.				MOTHER.
(12) FULL NAME				(14) NAME BEFORE MARRIAGE <u>Harriett Richardson</u>
(13) PRESENT POSTOFFICE OF FATHER				(15) PRESENT POSTOFFICE OF MOTHER <u>Pineuf S.C.</u>
(16) COLOR OR RACE <u>negro</u>	(11) AGE AT LAST BIRTHDAY <u>23</u>	(17) AGE AT LAST BIRTHDAY <u>23</u>		
(18) BIRTHPLACE	(19) BIRTHPLACE <u>S.C.</u>			
(20) OCCUPATION	(21) OCCUPATION <u>Domestic</u>			
(22) Number of children born to mother, including present birth <u>1</u>				(23) Number of children of this mother now living, including present birth <u>1</u>

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(25) (Signature) Harriett Richardson

(26) State whether Physician or Midwife
Midwife

(27) Address of Physician or Midwife
Pineuf S.C.

Given name added from a supplement-
 tal report

(28) Witness

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

(29) Filed Feb. 10, 1923 (30) C. S. Giffen
 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.