

(1) PLACE OF BIRTH

County of Lexington
 Township of Platt Springs
 or
 Inc. Town of.....
 or
 City of

CERTIFICATE OF BIRTH

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

No. 10.—For State Registrar
41637 ✓

Registration District No. #3.11.0

Registered No. 3.6
 (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 Lainell Baughman

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

(3) SEX OR Girl (4) Type - (5) Number in L (6) Age Yes (7) DATE OF BIRTH Oct 23 1923
 To be answered only in case of Twin or Triplet (Month) (Day) (Year)

FATHER.

(8) FULL NAME Charlie E Baughman

(9) PRESENT POSTOFFICE OF FATHER Gaston S.C.

(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 47
 (Year)

(12) BIRTHPLACE Lexington Co

(13) OCCUPATION Farming

(14) Number of children born to mother, including present birth 19

MOTHER.

(15) NAME BEFORE MARRIAGE Beaula Sanders

(16) PRESENT POSTOFFICE OF MOTHER Gaston S.C.

(17) COLOR OR RACE white (18) AGE AT LAST BIRTHDAY 29
 (Year)

(19) BIRTHPLACE Lexington Co

(20) OCCUPATION Domestic

(21) Number of children of this mother now living, including present birth 17

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 2.4 M.,
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Jane Shep

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Gaston S.C.

Given name added from a supplemental report

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

(27) Signed Dec 11 1923 (28) Miss Joe Fallam
 Registrar 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.