

Form No. 1

(1) PLACE OF BIRTH

County of RichlandTownship of St. Helena

Inc. Town of

City of

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Maryjane Luthardt

File No.—For State Registrar Only

13000

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

Registration District No. 604Registered No.
(For use of Local Registrar)

(No. St.; Ward)

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 event of Twins or Triplets

(5) Number in order of birth

(6) Are Parents Married?

Yes

(7) DATE OF BIRTH

1923
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Brayley Luthardt

(9) PRESENT POSTOFFICE OF FATHER

Freemont St.

(10) COLOR OR RACE

B

(11) AGE AT LAST BIRTHDAY

35
(Years)

(12) BIRTHPLACE

SC

(13) OCCUPATION

Laborer

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

4

MOTHER.

(15) NAME BEFORE MARRIAGE

Emma A. Polite

(16) PRESENT POSTOFFICE OF MOTHER

Freemont St.

(17) COLOR OR RACE

B

(18) AGE AT LAST BIRTHDAY

35
(Years)

(19) BIRTHPLACE

SC

(20) OCCUPATION

Housewife

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

4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 4 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

(When name added from a supplemental report)

(26) Witness

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

(27) Filed

28.10.23

(28)

A. J. Thayer
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.