

Form No. 8

(1) PLACE OF BIRTH

County of Spartanburg
 Township of Holly Hill
 or Holly Hill
 Inc. Town of Holly Hill
 or Holly Hill
 City of Holly Hill (No. 3609 St. 120 Ward)

CERTIFICATE OF BIRTH

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

FILE NO. For State Registrar

38425

Registration District No. 3609 Registered No. 120
 (For use of Local Registrar)

(2) Full Name of Child

Bessie Randolph (If birth occurs in a hospital or other institution, give name of same instead of street and number.)
 If child is not yet named, make supplemental report as directed

(1) BOY OR GIRL? <u>Boy</u>	(4) Twin or Triplet? <u>No</u>	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>July 16, 1923</u> (Name of Month) (Day) (Year)
FATHER			MOTHER	
(8) FULL NAME <u>Kitt Randolph</u>			(14) NAME BEFORE MARRIAGE <u>Idell Ashby</u>	
(9) PRESENT POSTOFFICE OF FATHER <u>Holly Hill S.C.</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Holly Hill S.C.</u>	
(10) COLOR OR RACE <u>Negro</u>	(11) AGE AT LAST BIRTHDAY <u>27</u> (Years)	(16) COLOR OR RACE <u>Negro</u>	(17) AGE AT LAST BIRTHDAY <u>27</u> (Years)	
(12) BIRTHPLACE <u>S.C.</u>			(18) BIRTHPLACE <u>S.C.</u>	
(13) OCCUPATION <u>Farmer Hand</u>			(19) OCCUPATION <u>Farmer Hand</u>	
(20) Number of children born to mother, including present birth: <u>3</u>			(21) Number of children of this mother now living, including present birth: <u>3</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive 1 P. M., on the date above stated. (Born alive or stillborn (Hour A. M. or P. M.))

(23) (Signature) Nellie Randolph(24) State whether Physician or Midwife Midwife(25) Address of Physician or Midwife Holly Hill S.C.

When name added from a supplemental report

(26) Witness W. H. Henshaw

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

(27) Filed July 6, 1923(28) H. M. Henshaw

Local Registrar.

When there was no attending physician or midwife, then the father, householder, etc., should make this return.
 If a child branches even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.