

(1) PLACE OF BIRTH

County of *Richmond*Township of *Richmond*

or

Inc. Town of

or

City of

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

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

File No. — For State Registrar Only
50507

Registration District No. *4417* Registered No. *22*
 (For use of Local Registrar)

St.; Ward)

Registrar)
 ... Ward)
 per.)

ed, make
 directed

1916
 (Year)

(Years)

A. M.,
 P. M.)

Midwife

P. M.

Registrar.

turn. If
 re the

1916

Local Registrar

(2) Full Name of Child *Thos. Linder* If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? *boy* (4) Twin or Triplet? *No* (5) Number in order of birth *1* (6) Are Parents Married? *yes* (7) DATE OF BIRTH *Feb. 14 1916*
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME *Thomas Linder*

(9) PRESENT POSTOFFICE OF FATHER *Welford Road 1 S.C.*

(10) COLOR OR RACE *Black* (11) AGE AT LAST BIRTHDAY *20* (Years)

(12) BIRTHPLACE *Spaulding Co. S.C.*

(13) OCCUPATION *Milker at Dairy & Farmhand*

(14) Number of children born to mother, including present birth *1*

MOTHER.

(14) NAME BEFORE MARRIAGE *Elouise Tucker*

(15) PRESENT POSTOFFICE OF MOTHER *Welford Road 1 S.C.*

(16) COLOR OR RACE *Black* (17) AGE AT LAST BIRTHDAY *17* (Years)

(18) BIRTHPLACE *Spaulding Co. S.C.*

(19) OCCUPATION *Housekeeper*

(20) Number of children of this mother now living, including present birth *1*

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(21) I hereby certify that I attended the birth of this child, who was *alive*, at *4:30 P. M.* (Born alive or stillborn) (Hour A. M. or P. M.)
 on the date above stated.

(22) (Signature) *Doan*

(23) State whether Physician or Midwife (24) Address of Physician or Midwife *Redville S.C.*

Given name added from a supplemental report

1916

Registrar

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

(26) Filed *Nov. 7* 1916 (27) 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.