

MARGIN RESERVED FOR BINDING.

WRITE PLAINLY, WITH FADING INK—THIS IS A PERMANENT RECORD.

N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 1.

Form No. 5.

(1) PLACE OF BIRTH

County of Richland

Township of .....

Inc. Town of Fander Road

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

Registration District No. 38 B

No. for State Registrar Only

37441

Registered No. 302

(For use of Local Registrar)

(2) Full Name of Child Barbara Ann

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

(3) BOY OR GIRL girl (4) Twin or Triplet No (5) Number in order of birth 1 (6) Age Parents Married 10 (7) DATE OF BIRTH Nov 27 19 53 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME John Alexander Annunzio

(9) PRESENT POSTOFFICE OF FATHER Eastover, S.C.

(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 34 (Years)

(12) BIRTHPLACE Eastover, S.C.

(13) OCCUPATION farmer

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

MOTHER.

(14) NAME BEFORE MARRIAGE Mrs. Juliana Tarsenian

(15) PRESENT POSTOFFICE OF MOTHER Columbia, S.C.

(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 30 (Years)

(18) BIRTHPLACE Eastover, S.C.

(19) OCCUPATION domestic

(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 12:00 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(22) (Signature) M. L. Rice

(23) State whether Physician or Midwife mid

(24) Address of Physician or Midwife 1317 Lady St

(Given name added from a supplemental report)

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

(26) Filed Dec 21 19 53 Ad. Sloan 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.

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