

## (1) PLACE OF BIRTH

County of FlorenceTownship of McMillanor  
Inc. Town of .....or  
City of .....

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

No. 40317Registration District No. 2011Registered No. 71

(If use of Local Registrar)

(No. ....) (If birth occurs in a hospital or other institution, give name of same instead of street ....)

(2) Full Name of Child Azela Hatchell If child is ...(3) BOY OR GIRL Girl (4) Sex of Child Yes (5) DATE OF BIRTH 10-23

FATHER.

(6) FULL NAME Harry Thomas Hatchell (14) NAME BEFORE MARRIAGE Thomas(7) PRESENT POSTOFFICE OF FATHER Camden, S.C. R.F.D. #1 (15) PRESENT POSTOFFICE OF MOTHER Camden, S.C. R.F.D. #1(16) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 35 (18) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 24(12) BIRTHPLACE Florence, Co. (19) BIRTHPLACE Florence, Co.(13) OCCUPATION Fireman, U.S. Ry. (20) OCCUPATION Fireman, U.S. Ry.(21) Number of children born to mother, including present birth 1 (22) Number of children born to father, including present birth 1

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(23) I hereby certify that I attended the birth of this child, who was ... on the date above stated.

(24) (Signature) M. H. ... (25) State whether Physician or Midwife Physician

Given name added from a supplemental report

(26) Witness (Signature of Witness when question is to sign)

(27) Filed (28) (29)

When there was no attending physician or midwife, then the father, householder, or other person present at the birth must report the birth to the Registrar before the fifth month of pregnancy.

If a child breathes even once, it must not be reported as stillborn. No report is needed of a stillborn child before the fifth month of pregnancy.

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