

Form No. 1

## (1) PLACE OF BIRTH

County of Richmond  
 Township of Schultz  
 OF  
 Inc. Town of North Augusta  
 OF  
 City of \_\_\_\_\_

## CERTIFICATE OF BIRTH

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

File No.—for State Registrar Only

26823

Registration District No. 2 C Registered No. 13  
 (For use of Local Registrar)

(No. \_\_\_\_\_ St.; \_\_\_\_\_ Ward)  
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Ortha Howard If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL girl (4) Twin or Triplet? \_\_\_\_\_ (5) Number in order of birth \_\_\_\_\_ (6) Are Parents Married? yes (7) DATE OF BIRTH June 1923  
 (Name of Month) (Day) (Year)

FATHER. (8) FULL NAME Alton Howard (14) NAME BEFORE MARRIAGE Alma Tyler

(9) PRESENT POSTOFFICE OF FATHER North Augusta SC (15) PRESENT POSTOFFICE OF MOTHER North Augusta SC

(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 38 (Year) (16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 34 (Year)

(12) BIRTHPLACE SC (18) BIRTHPLACE SC

(13) OCCUPATION Car Inspector Sou RR (19) OCCUPATION House

(20) Number of children born to mother, including present birth 3 (21) Number of children of this mother now living, including present birth 2

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 10:10 M., on the date above stated. (Hour A. M. or P. M.)

(23) (Signature) J. M. Caldwell (24) State whether Physician or Midwife Physician (25) Address of Physician and Midwife Augusta Ga

Given name added from a supplemental report

John Fairley  
Dec 18 1923  
 Registrar

(26) Witness \_\_\_\_\_ (Signature of Witness necessary only when question 23 is signed in ink)

(27) Filed 10-15 1923 (28) J. L. Medlock 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.