

(1) PLACE OF BIRTH

County of St. Louis
 Township of Jefferson
 or Town of Manchester
 or City of

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

No. 1.—For this Register

40277

Registration District No. 2007 Registered No. 54
 (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 Chris Anna Parker (If child is not yet named, make supplemental report as directed)

(3) SEX OF CHILD Female (4) Age or Years 8 (5) Date of Birth Dec 5, 1923
 (6) DATE OF BIRTH (Month of Month) (Day) (Year)

FATHER.

(7) FULL NAME C. J. Parker
 (8) PRESENT POST OFFICE OF FATHER Manchester SC
 (9) COLOR OR RACE White (10) AGE AT LAST BIRTHDAY 39
 (11) BIRTHPLACE Manchester SC
 (12) OCCUPATION Farmer
 (13) Number of children born to mother, including present birth Eight

MOTHER.

(14) NAME BEFORE MARRIAGE Anna Doris
 (15) PRESENT POST OFFICE OF MOTHER Manchester SC
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 33
 (18) BIRTHPLACE Darlington SC
 (19) OCCUPATION Domestic
 (20) Number of children of this mother now living, including present birth Eight

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(22) (Signature) Josephine M. Feltner

(23) State whether Physician or Midwife

(24) Address of Physician or Midwife

Given name added from a supplemental report

(25) Witness
 (Signature of Witness necessary only when question is so signed by mother)

(26) Signed Thos. H. H. H. H. (27) Date Jan 1, 1924

Registrar

When there was no attending physician or midwife, then the father, householder, or other person present at the birth, if a child breathes even once, it must not be reported as stillborn. No report is required if the child is stillborn before the fifth month of pregnancy.