

Form No. 1

(1) PLACE OF BIRTH

County of Richland  
Township of Eastover  
Inc. Town of Westville  
City of Westville

CERTIFICATE OF BIRTH

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

File No. — For State Registrar Only

8412

Registration District No. 3803

Registered No. 90  
(For use of Local Registrar)

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

(2) Full Name of Child Sue Adams

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

1 BOY OR GIRL girl

4 Twin or Triplet?

5 Number in order of birth 1  
To be covered only in event of Twin or Triplet

6 Are Parents Married? yes

7 DATE OF BIRTH Feb 7, 1923  
(Name of Month) (Day) (Year)

FATHER.

8 FULL NAME King Adams

9 PRESENT POSTOFFICE OF FATHER Eastover

10 COLOR OF RACE Colored

(11) AGE AT LAST BIRTHDAY 31  
(Years)

12 BIRTHPLACE ?

13 OCCUPATION Hammer

20 Number of children born to mother, including present birth

MOTHER.

(14) NAME BEFORE MARRIAGE Sue Adams

(15) PRESENT POSTOFFICE OF MOTHER Eastover

(16) COLOR OR RACE Colored

(17) AGE AT LAST BIRTHDAY 27  
(Years)

(18) BIRTHPLACE ?

(19) OCCUPATION

(21) Number of children of this mother now living, including present birth

1 head

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was Born A. M. at 8 P. M.,  
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) W. Miller

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Congaree Se.

Given name added from a supplemental report

(26) Witness

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

(27) Filed

19 23

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.