

1. Permanent Record.  
2. Separate Blank for Each Child, and mark the  
Part-Born, No. 1. THE OTHER, No. 2, etc. in question 5.  
SOUTH CAROLINA, Columbia, S. C.

(1) PLACE OF BIRTH

County of Richland Co.

Township of .....

or  
Inc. Town of .....

or  
City of Columbia

(If birth occurs in a hospital or other institution, give name of same in parentheses.)

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

Registration District No. 3-8

File No. - For State Registrar Only

8876

Registered No. 1196

(For use of Local Registrar)

(No. 2815 Lincoln St.)

Street and number, Ward

(2) Full Name of Child Richard Claude Hise

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 10

(6) Are Parents Married? yes

(7) DATE OF BIRTH

Jan 3 1922  
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Benj. H. Hise

(9) PRESENT POSTOFFICE OF FATHER Columbia S.C.

(10) COLOR OR RACE White

(11) AGE AT LAST BIRTHDAY 42  
(Years)

(12) BIRTHPLACE S.C.

(13) OCCUPATION Insomth

(20) Number of children born to mother, including present birth 10

MOTHER.

(14) NAME BEFORE MARRIAGE Alice Clark

(15) PRESENT POSTOFFICE OF MOTHER 2815 Lincoln St.

(16) COLOR OR RACE White

(17) AGE AT LAST BIRTHDAY 40  
(Years)

(18) BIRTHPLACE S.C.

(19) OCCUPATION Housewife

(21) Number of children of this mother now living, including present birth 10

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(22) I hereby certify that I attended the birth of this child, who was Alice at 12:30 P.M. on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)

(23) (Signature) M. D. Evans

(24) State whether Physician or Midwife M.D.

(25) Address of Physician or Midwife 1501 1/2 Taylor St.

Given name address from supplemental report

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

(27) Filed 3-21 19 22 (28) 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.

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