

(1) PLACE OF BIRTH

County of

Richland

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

5030

Township of

or

Inc. Town of

or

City of

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

Registration District No.

Registered No.

(For use of Local Registrar)

(2) Full Name of Child

George Starks

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

(1) BOY OR GIRL?

Boy

(4) Twin or triplet?

(3) Number in order of birth

To be answered only in event of twins or triplets

(6) Are Parents Married?

Yes

(7) DATE OF BIRTH

Feb. 23

(Year)

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Belton Starks

(9) PRESENT POSTOFFICE OF FATHER

Columbia SC

(10) COLOR OR RACE

Colored

(11) AGE AT LAST BIRTHDAY

22

(Years)

(12) BIRTHPLACE

Richland, Co.

(13) OCCUPATION

Labor

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

One

MOTHER.

(14) NAME BEFORE MARRIAGE

Francis Lee

(15) PRESENT POSTOFFICE OF MOTHER

Columbia SC

(16) COLOR OR RACE

Colored

(17) AGE AT LAST BIRTHDAY

17

(Years)

(18) BIRTHPLACE

Richland

(19) OCCUPATION

house work

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

One

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was

alive

at

6:15 A.

M.

on the date above stated.

(Born alive or stillborn)

(Hour A. M. or P. M.)

(23) (Signature)

Fannie Lee

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

midwife 2109 Elmwood St

(Given name added from a supplemental report)

(26) Witness

Annie Brown

(Signature of Witness necessary only when question 22 is signed by mark)

(27) Filed

3/3 1923

(28)

ad. Sloan

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.

Before the fifth month of pregnancy.