

(1) PLACE OF BIRTH

County of BerkeleyTownship of St. Stephensor
Inc. Town of

City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

3272

Registration District No. 725Registered No. 15

(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 De Roy FlemingIf child is not yet named, make
supplemental report as directed3. BOY OR
GIRL B4. Twin
or Triplet?(5) Number in
order of birth(6) Are
Parents
Married? yes(7) DATE OF
BIRTHFeb. 2, 1922

To be answered only in event of Twins or Triplets

(Name of Month) (Day) (Year)

FATHER

MOTHER

8. FULL
NAMEAlfred Fleming(14) NAME BEFORE
MARRIAGECorinne Montgomery9. PRESENT
POSTOFFICE
OF FATHERSt. Stephens(15) PRESENT
POSTOFFICE
OF MOTHERSt. Stephens(10) COLOR
OR
RACEnegro(11) AGE AT LAST
BIRTHDAY21
(Years)(16) COLOR
OR
RACEnegro(17) AGE AT LAST
BIRTHDAY19
(Years)

12. BIRTHPLACE

N.C.

(18) BIRTHPLACE

St. Stephens

13. OCCUPATION

Farming

(19) OCCUPATION

Farm - wife20. Number of children born to
mother, including present birth(21) Number of children of this mother
now living, including present birth

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 49 M.,
on the date above stated. (Born alive or stillborn: (Hour A.M. or P.M.)(23) (Signature) Willie Wilson

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

midwife St. StephensGiven name added from a supplement-
tal report

(26) Witness

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

(27) Filed

Feb. 25, 1922(28) W. S. F.

Local Registrar

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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.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.