

(1) PLACE OF BIRTH  
County of Charleston  
Township of .....

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

File No. — For State Registrar Only  
41210

Inc. Town or City of Charleston Registration District No. 9 A Registered No. 1847  
(No. Rox Hospital) (For use of Local Registrar)  
City of Charleston (No. Rox Hospital) 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 Helma Simmons If child is not yet named, make supplemental report as directed

(3) Age of Girl born (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? No (7) DATE OF BIRTH 12 22 22  
(Name of Month) (Day) (Year)

FATHER.  
(8) FULL NAME Lewis Simmons  
(9) PRESENT POSTOFFICE OF FATHER Rodeliffe St.  
(10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 21 (Years)  
(12) BIRTHPLACE S.C.  
(13) OCCUPATION Labour  
(14) Number of children born to mother, including present birth { 2 }

MOTHER.  
(15) NAME BEFORE MARRIAGE Agnes Williams  
(16) PRESENT POSTOFFICE OF MOTHER 189 Smith  
(17) COLOR OR RACE Colored (18) AGE AT LAST BIRTHDAY 21 (Years)  
(19) BIRTHPLACE S.C.  
(20) OCCUPATION Domestic  
(21) Number of children of this mother now living, including present birth { 2 }

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was born alive at 1 1/2 on the date above stated. (Hour A.M. or P.M.)

(23) Signature Thos. J. Pearson  
(24) State whether Physician or Midwife Physician Address of Physician or Midwife Charleston

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 23 is signed as correct)  
(27) Filed 1/3 23 (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.