

## 1) PLACE OF BIRTH

County of BeaufortTownship of Savannah

Incl. Town of .....

City of .....

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

Registration District No. 622A

File No.—For State Registrar Only

3190

Registered No. .... 10  
(For use of Local Registrar)(No. .... St.;  
(For use of Local Registrar)(2) Full Name of Child Martha HolmesIf child is not yet named, make  
supplemental report as directed6) SEX  
MALE7) Twin  
or Triplet?8) Number in  
order of birth9) Are  
Parents  
Married? No10) DATE OF  
BIRTH Feb 15 1922  
(Name of Month) (Day) (Year)

To be answered only in event of Twins or Triplets

## FATHER.

11) NAME

12) PRESENT  
OFFICE  
FATHER13) COLOR  
OR  
RACE  
BIRTH-PLACE

14) OCCUPATION

15) AGE AT LAST  
BIRTHDAY. (Years)

## MOTHER.

16) NAME BEFORE  
MARRIAGE Mary Holmes17) PRESENT  
POSTOFFICE  
OF MOTHER Dale, S.C.18) COLOR  
OR  
RACE Negro 19) AGE AT LAST  
BIRTHDAY. (Years)20) BIRTHPLACE  
Colleton Co., S.C.

21) OCCUPATION

Farm Laborer22) Number of children of this mother  
now living, including present birth(23) I hereby certify that I attended the birth of this child, who was Born alive at 5:00 P.M.  
(Born alive or stillborn) (Hour A. M. or P. M.)  
on the date above stated.(24) (Signature) Felix H. Worthington  
(25) State whether Physician or Midwife (26) Address of Physician or Midwife  
Wald, S.C.Given name added from a supplement-  
al report(27) Witness L. K. Kershaw  
(Signature of Witness necessary only  
when question 23 is signed by mark)(28) Filed Feb 20 1922 (29) M. H. Hatten  
Local RegistrarWhen there was no attending physician or midwife, then the father, householder, etc., should make this return.  
If child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths  
before the fifth month of pregnancy.