

(1) PLACE OF BIRTH

County of Charleston
 Township of
 or
 Inc. Town of
 or
 City of Charleston

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

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

25150

1214

Registration District No. 9 A Registered No. 1214

(For use of Local Registrar)

(No. Roper Hospital St.; Ward)(2) Full Name of Child Thomas Smalls

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

(3) BOY OR GIRL Boy (4) Twin or Triplet? No. (5) Number in order of birth no. (6) Are Parents Married? no. (7) DATE OF BIRTH aug 26 1922
 To be answered only in event of Twins or Triplets (Name of month) (Day) (Year)

FATHER.

MOTHER.

(8) FULL NAME Mr Henry Alexander.(14) NAME BEFORE MARRIAGE Martha Smalls(9) PRESENT POSTOFFICE OF FATHER Charleston, S.C.(15) PRESENT POSTOFFICE OF MOTHER Charleston, S.C.(10) COLOR OR RACE n. gro (11) AGE AT LAST BIRTHDAY 18
 (Years)(16) COLOR OR RACE negro. (17) AGE AT LAST BIRTHDAY 18
 (Years)(12) BIRTHPLACE Charleston S.C.(18) BIRTHPLACE Charleston S.C.(13) OCCUPATION Painter.(19) OCCUPATION domestic.(20) Number of children born to mother, including present birth 1(21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Born alive at 9:25 A.M.
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) J. L. M. M. L.(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Charleston S.C.

Given name added from a supplemental report

(26) Witness
 (Signature of Witness necessary only when question 23 is signed by mark)(27) Filed 8 28 19 22 (28) J. Mercer Green M. L.
 Registrar 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.