

(1) PLACE OF BIRTH
County of Darlington

Township of

or
Inc. Town of Darlington

City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

41918

Registration District No. 15-A Registered No. 46

(For use of Local Registrar)

(No. 109 Cleveland St 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. Ethel Juanita Briggs .. { If child is not yet named, make supplemental report as directed

(1) BOY OR GIRL? <u>Girl</u>	(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Oct. 30, 1922</u> (Name of Month) (Day) (Year)
------------------------------	----------------------	------------------------------	-------------------------------------	--

FATHER.

(3) FULL NAME Colon Briggs

(9) PRESENT POSTOFFICE OF FATHER Darlington S.C.

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 23
(Years)

(12) BIRTHPLACE South Carolina

(13) OCCUPATION Laborer in Cotton Mill

(20) Number of children born to mother, including present birth { 1

MOTHER.

(14) NAME BEFORE MARRIAGE Mother Hancock

(15) PRESENT POSTOFFICE OF MOTHER Darlington

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 20
(Years)

(18) BIRTHPLACE South Carolina

(19) OCCUPATION Spinner in Cotton Mill

(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 11:20 a. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Julian T. Loggins

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Physician Darlington 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 Jan 3 1923 (28) E. A. Early 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.