

1. PLACE OF BIRTH

Charleston

Standard Certificate of Birth
STATE OF SOUTH CAROLINABureau of Vital Statistics
State Board of Health

FILE No.—For State Registrar Only

10280

County of _____

Township of _____

or _____

Inc. Town of _____

or _____

City of _____

Registration District No. 9A

Registered No. 568

(For use of Local Registrar)

(No. 17 Honey Ct.

St. _____

Ward) _____

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

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

2. FULL NAME OF CHILD James Smalls

1. Boy or Girl

Male

If Plural

Births

4. Twin, triplet, or other

5. Premature

Full term

7. Legiti-

mate? Yes

8. Date of birth

Apr. 17, 1942

(Month, day, year)

3. Full name

FATHER
Cleveland Smalls

18. Full maiden name

MOTHER
Wilhelmina Morrison10. Residence (usual place of abode)
(If nonresident, give place and State)

Charleston, S.C.

19. Residence (usual place of abode)
(If nonresident, give place and State)

Charleston, S.C.

11. Color or race

Col.

12. Age at last birthday

31

(Years)

20. Color or race

Co.

21. Age at last birthday

25

(Years)

13. Birthplace (city or place)

Adams Run, S.C.

22. Birthplace (city or place)

Charleston

(State or country)

14. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc.

Laborer

23. Trade, profession, or particular kind of work done, as housekeeper, typist, nurse, clerk, etc.

Housework

15. Industry or business in which work was done, as silk mill, sawmill, bank, etc.

16. Date (month and year) last engaged in this work

19

17. Total time (years) spent in this work

24. Industry or business in which work was done, as own home, lawyer's office, silk mill, etc.

25. Date (month and year) last engaged in this work

19

26. Total time (years) spent in this work

27. Number of children of this mother
(At time of this birth and including this child)

4

(a) Born alive and now living

3

(b) Born alive but now dead

(c) Stillborn

28. If stillborn,

period of gestation

{ months

{ weeks

29. Cause of stillbirth

Before labor

During labor

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

born alive

at 8 Am on the date above stated

(Born alive or stillborn)

I hereby certify that I attended the birth of this child, who was

(Signed)

Anna Green

M. D.

or

Midwife

Address

Charleston, S.C.

Filed

4/25/22 19

J. M. Green, M. D.

Registrar

Registrar

Cor. 10/17/20

S. G. Fagnall

sub-R. G.

When there was no attending physician or midwife, then the father, householder, or, should make this return.

Given name added from supplemental report

(Date of)

STATE OF SOUTH CAROLINA
COUNTY OF CHARLESTON

PERSONALLY appeared before me, Emma G. Pregnall, a Notary Public of South Carolina, Wilhelmina Smalls, who being duly sworn says and deposes that: she is the mother of James Smalls, a male child who was born in the City of Charleston, on April 17th, 1922: that Anna Green was the midwife who attended her and that she recorded this birth: that Anna Green made several mistakes in the original record and that she has given the answers on the attached return of birth and that same are true and correct.

M X (MARK) Wilhelmina Smalls
Mother.

SWORN to before me this

17th day of OCTOBER A.D. 1922

Emma G. Pregnall
Notary Public, S.C.

Witnessed: M. L. Smith
Shampine