

N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

(1) PLACE OF BIRTH
County of Charleston
Township of
or
Inc. Town of
or
City of Charleston (No. 35 Lucas St.)
(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
84641

(2) Full Name of Child Shirley Louise Young { If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? MC (4) Twin or Triplet? no (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Nov 7 1916
(Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME John Smith
(9) PRESENT POSTOFFICE OF FATHER Charleston
(10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 29 (Years)
(12) BIRTHPLACE Charleston
(13) OCCUPATION labor
(20) Number of children born to mother, including present birth { 1

MOTHER.
(14) NAME BEFORE MARRIAGE Wiley Wingo
(15) PRESENT POSTOFFICE OF MOTHER Charleston
(16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 27 (Years)
(18) BIRTHPLACE Charleston
(19) OCCUPATION house work
(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 Alive at 7:30 PM, on the date above stated.
(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Anna M. Wilson

(24) State whether Physician or Midwife (25) Address of Physician or Midwife
Midwife 32 Sumner St.

Given name added from a supplemental report

(26) Witness
(Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed 11/15/16 (28) J. Morris Green, M.D. 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.

Registrar

Filed

On 10/24/16