

MARGIN RESERVED FOR BINDING.
 WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
 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 Georgetown
 Township of
 or
 Inc. Town of
 or
 City of Georgetown (No. St.; Ward)
 (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

22208

Registration District No. 21CRegistered No. 46
(For use of Local Registrar)

(2) Full Name of Child

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

(3) BOY OR GIRL?

Boy

(4) Twin or Triplet?

To be answered only in event of Twins or Triplets

(5) Number in order of birth

(6) Are Parents Married?

Yes

(7) DATE OF BIRTH

June 9, 1922
(Name of Month) (Day) (Year)

FATHER

(8) FULL NAME

Henry Rutledge

(9) PRESENT POSTOFFICE OF FATHER

Georgetown

(10) COLOR OR RACE

Negro

(11) AGE AT LAST BIRTHDAY

46
(Years)

(12) BIRTHPLACE

S.C.

(13) OCCUPATION

Laborer

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

6

MOTHER

(14) NAME BEFORE MARRIAGE

Regenia Squire

(15) PRESENT POSTOFFICE OF MOTHER

Georgetown

(16) COLOR OR RACE

Negro

(17) AGE AT LAST BIRTHDAY

39
(Years)

(18) BIRTHPLACE

S.C.

(19) OCCUPATION

Domestic

(21) Number of children of this mother now living, including present birth

6

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 10 P. M.,
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Charlotte Desane
Midwife

Given name added from a supplemental report

(26) Witness

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

(27) Filed

June 1922

(28)

Mrs. R. Y. King
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.