

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 2.

(1) PLACE OF BIRTH

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

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

Registration District No. 901 Registered No. 20
(For use of Local Registrar)

File No.—For State Registrar Only
604

(No. 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 Virginia Simmons

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

(3) BOY OR GIRL Girl (4) Twin or Triplet? no (5) Number in order of birth Child
To be answered only in event of Twins or Triplets

(6) Are Parents Married? yes (7) DATE OF BIRTH Jan 26, 1922
(Month) (Day) (Year)

FATHER.

(8) FULL NAME Isaac Simmons
(9) PRESENT POSTOFFICE OF FATHER 1111st Pleasant
(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 34 (Years)
(12) BIRTHPLACE Charleston S.C.
(13) OCCUPATION laborer
(20) Number of children born to mother, including present birth 2

MOTHER.

(14) NAME BEFORE MARRIAGE Etter Button
(15) PRESENT POSTOFFICE OF MOTHER 1111st Pleasant
(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 24 (Years)
(18) BIRTHPLACE Charleston
(19) OCCUPATION housewife
(21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was colored at 7:15 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Harmon S. Snodgrass
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife 1111st Pleasant

Given name added from a supplemental report

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

(27) Filed Jan 31, 1922 (28) L. T. Lane 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.