

MAJORITY REGISTERED FOR BIRTHING.
 WHITE - MAJORITY REGISTERED FOR BIRTHING.
 IN CASE OF WHITE CHILD, FATHER OR MOTHER OR BOTH MUST BE WHITE. IN CASE OF COLORED CHILD, FATHER OR MOTHER OR BOTH MUST BE COLORED.
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(1) PLACE OF BIRTH

County of Berkeley Co
 Township of St Johns
 or
 Inc. Town of
 or
 City of

CERTIFICATE OF BIRTH

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

File No. - For State Registrar Only

3238

Registration District No. 7.02

Registered No. 11
 (For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)
 (No. St. Johns St.; 11 Ward)

(2) Full Name of Child

Mary Wilkins

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

(3) SEX GIRL (4) Twin or Triplet? No (5) Number in order of birth 5 (6) Are Parents Married? Yes (7) DATE OF BIRTH June 4, 1922
 (Month) (Day) (Year)

FATHER

(8) FULL NAME Arthur Wilkins
 (9) PRESENT POSTOFFICE OF FATHER Cordisville, S.C.
 (10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 35 (Year)
 (12) BIRTHPLACE Berkeley Co
 (13) OCCUPATION Farmer
 (14) Number of children born to mother, including present birth 1

MOTHER

(15) NAME BEFORE MARRIAGE Rige Hudson
 (16) PRESENT POSTOFFICE OF MOTHER Cordisville, S.C.
 (17) COLOR OR RACE negro (18) AGE AT LAST BIRTHDAY 33 (Year)
 (19) BIRTHPLACE Berkeley Co
 (20) OCCUPATION House wife
 (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 8 P.M. on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)

(23) (Signature) Phibby Crawford
 (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Cordisville

Given name added from a supplemental report
 (26) Signature of Witness necessary only when question 23 is signed by mother
 (27) Filed 1/9/22 (28) J. J. Cannon 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 required of stillbirths before the fifth month of pregnancy.