

(1) PLACE OF BIRTH
County of Christburg
Township of Dem

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

File No. For State Registrar Only
66634

Inc. Town of Registration District No. 4308 Registered No. 60
(For use of Local Registrar)
City of (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 Ima L. Berry If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? <u>girl</u>	(4) Twin or Triplet? <u>No</u>	(5) Number in order of birth <u>15</u>	(6) Are you Parent Married? <u>Yes</u>	(7) DATE OF BIRTH <u>June 28</u> 19 <u>46</u> (Name of Month) (Day) (Year)
FATHER.			MOTHER.	
8) FULL NAME <u>Lane S.C.</u>			14) NAME BEFORE MARRIAGE <u>Mary Berry</u>	
9) PRESENT POSTOFFICE OF FATHER <u>SC</u>			15) PRESENT POSTOFFICE OF MOTHER <u>Lane S.C.</u>	
10) COLOR OR RACE <u>white</u>			16) COLOR OR RACE <u>white</u>	
11) BIRTHPLACE <u>SC</u>			17) AGE AT LAST BIRTHDAY <u>32</u> (Years)	
12) OCCUPATION <u></u>			18) BIRTHPLACE <u></u>	
13) OCCUPATION <u></u>			19) OCCUPATION <u></u>	
20) Number of children born to mother, including present birth <u>15</u>			21) Number of children of this mother now living, including present birth <u>5</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive on the date above stated. (Born alive or stillborn) (Hour 4:30 P.M.)

(23) (Signature) Lane S.C. (24) State whether Physician or Midwife
(25) Address of Physician or Midwife
Lane S.C.

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
Yvonne
(27) FIVE (28) Local Registrar
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.

A.R. Mosely Local Registrar