

(1) PLACE OF BIRTH

County of Charleston

Township of

Inc. Town of

City of Charleston

(If birth occurs in a hospital or

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

33392

Registration District No. 9A Registered No. 1487

(For use of Local Registrar)

(No. Riverside Infirmary St. 8 Ward 8)
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)(2) Full Name of Child. Catherine Stewart Kollock If child is not yet named, make supplemental report as directed

(1) BOY OR GIRL? <u>girl</u>	(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>Sept. 12 22</u> (Name of Month) (Day) (Year)
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FATHER.

(8) FULL NAME Edward Campbell Kollock(9) PRESENT POSTOFFICE OF FATHER Charleston SC(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 35 (Years)(12) BIRTHPLACE Clarksville Ga(13) OCCUPATION Super. Consolidated Gas Co.(20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Beulah Miles(15) PRESENT POSTOFFICE OF MOTHER Charleston(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 29 (Years)(18) BIRTHPLACE Charleston SC(19) OCCUPATION 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 Born alive at 506 a M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) J. Mercer Green(24) State of South Carolina (25) Address of Physician or Midwife Physician Charleston

Given name added from a supplemental report

....., 191.....

Registrar

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

(27) Filed 10/9/22 (28) J. Mercer 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.

EMMA G. PREGNANT