

MARGIN RESERVED FOR INDEXING.  
WHEN PLACED IN A PERMANENT RECORD,  
THESE PLACES SHALL BE FILLED IN BY THE REGISTRAR OR A DEPUTY REGISTRAR FOR EACH CHILD, AND MARK THE  
FURNISHING, NO. 1. THE OTHER, NO. 2, ETC., IN QUESTION 5.

(1) PLACE OF BIRTH

County of Berkley  
Township of St. Stephen  
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

3282

Registration District No. 100 Registered No. 10  
(For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Reuby Brinson If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL girl (4) Twin or Triplet? L (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Feb 13 19 22  
To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Isaac Brinson  
(9) PRESENT POSTOFFICE OF FATHER Bonneau SC  
(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 39 (Year)  
(12) BIRTHPLACE Berkley Co  
(13) OCCUPATION nothing

MOTHER.

(14) NAME BEFORE MARRIAGE Marie Jones  
(15) PRESENT POSTOFFICE OF MOTHER Bonneau SC  
(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 38 (Year)  
(18) BIRTHPLACE Charleston Co  
(19) OCCUPATION house work

(20) Number of children born to mother, including present birth 14 (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..... 9 A.M...... on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)

(23) (Signature) Lanie Hitchfield

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

mid wife

Bonneau SC

Given name added from a supplemental report

(26) Witness

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

(27) Filed

Feb 25

1922

(28)

J. J. Query

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.