

## (1) PLACE OF BIRTH

County of Charleston  
 Township of "

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

41957

Inc. Town of ..... Registration District No. 1501 Registered No. 19  
 (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. Ruth Marie Suggs { If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL girl (4) Twin or Triplet? - (5) Number in order of birth - (6) Are Parents Married? yes (7) DATE OF BIRTH June 23 1911  
 (Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME C. S. Suggs

(9) PRESENT POSTOFFICE OF FATHER Charleston R

(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 47 (Years)

(12) BIRTHPLACE S.C.

(13) OCCUPATION Tanner

(20) Number of children born to mother, including present birth 9

## MOTHER

(14) NAME BEFORE MARRIAGE Lena Lewis

(15) PRESENT POSTOFFICE OF MOTHER Charleston R

(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 39 (Years)

(18) BIRTHPLACE S.C.

(19) OCCUPATION Housewife

(21) Number of children of this mother now living, including present birth 9

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was alive at 2 A M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) C. C. Little

(24) State whether Physician or Midwife (25) Address of Physician or Midwife Charleston

Given name added from a supplemental report

....., 1911

Registrar

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

(27) Filed June 1 1911 (28) E. C. Early 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.

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