

## (1) PLACE OF BIRTH

County of ColletonTownship of Pinckneyor  
Inc. Town of .....or  
City of .....

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

Registration District No. 820

File No.—For State Registrar Only

6687

Registered No. 35  
(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 Swift Gly Stokes (If child is not yet named, make supplemental report as directed)(3) BOY OR GIRL ly (4) Twin or Triplet? ✓ (5) Number in order of birth 1 (6) Are Parents Married? yn (7) DATE OF BIRTH Feb 21, 1922  
(Name of Month) (Day) (Year)

FATHER.		MOTHER.	
(8) FULL NAME <u>Robert Stokes</u>	(14) NAME BEFORE MARRIAGE <u>Alice Coran</u>	(15) PRESENT POSTOFFICE OF FATHER <u>St. Matthews</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>St. Matthews</u>
(10) COLOR OR RACE <u>Negro</u>	(11) AGE AT LAST BIRTHDAY <u>29</u> (Years)	(16) COLOR OR RACE <u>Negro</u>	(17) AGE AT LAST BIRTHDAY <u>36</u> (Years)
(12) BIRTHPLACE <u>South Carolina</u>	(18) OCCUPATION <u>Farmer</u>	(18) BIRTHPLACE <u>South Carolina</u>	(19) OCCUPATION <u>Farmer</u>
(20) Number of children born to mother, including present birth <u>4</u>	(21) Number of children of this mother now living, including present birth <u>1</u>		

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was born at 8 A. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Wm. J. Jenkins (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife St. MatthewsGiven name added from a supplemental report  
(26) Witness W. R. A. C. H. (Signature of Witness necessary only when question 23 is signed by mark)  
(27) Filed Apr 8, 1922 (28) W. R. A. C. H. 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.