(1) PLACE OF BIRTH

County of Charleston

Township of .....

or Inc. Town of .....

or City of Charleston

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

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

6852

Registration District No. 9A Registered No. 466

(For use of Local Registrar)

(No. Negro Hospital St., Ward)

(2) Full Name of Child Arthur Brown

If child is not yet named, make supplemental report as directed

(3) Boy or Girl	(4) Twin or Triplet (To be answered only in event of twins or triplets)	(5) Number in order of birth	(6) Are Parents Married?	(7) DATE OF BIRTH (Name of Month)	(Day)	(Year)
Boy	Twin	First	Yes	March	25	22

FATHER

(8) FULL NAME Arthur Brown

(9) PRESENT POSTOFFICE OF FATHER Charleston, S.C.

(10) COLOR OR RACE Negro

(11) AGE AT LAST BIRTHDAY 27 (Years)

(12) BIRTHPLACE Savannah, Ga

(13) OCCUPATION Waiter

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

MOTHER

(14) NAME BEFORE MARRIAGE Marie Duncan

(15) PRESENT POSTOFFICE OF MOTHER Charleston, S.C.

(16) COLOR OR RACE Negro

(17) AGE AT LAST BIRTHDAY 24 (Years)

(18) BIRTHPLACE Charleston, S.C.

(19) OCCUPATION Domestic

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

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 7:30 A. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) A. W. Young

(24) State whether Physician or Midwife M.D.

(25) Address of Physician or Midwife .....

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 3/28 1922 (28) 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.

Correction 19 22