

THIS IS A PERMANENT RECORD. IN CASE OF TWIN OR TRIPLE BIRTH, PLEASE PRINT NAME OF EACH CHILD, AND MARK THE CHILDREN, NO. 1, THE OTHER, NO. 2, AS IN QUESTION 1.

(1) PLACE OF BIRTH

County Union

Township of Beaufort

OR Town of Beaufort

OR City of Beaufort

(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

0410

Registration District No. 42-07

Registered No. 9-0  
(For use of Local Registrar)

(2) Full Name of Child

Mary Ruth Wilson

child is not yet named, make supplemental report as directed

(3) Sex of Child  
GIRL

(4) Twin or Triple?

(5) Number in order of birth

(6) Are Parents Married?

(7) DATE OF BIRTH

Feb 28  
(Name of Month) (Day) (Year)

To be answered only in case of Twin or Triplet

FATHER

(8) Full Name of Father Colin H. Wilson

(9) Present Postoffice of Father Union S.C.

(10) Color or Race W.

(11) Age at Last Birthday 29  
(Year)

(12) Birthplace Brunswick Co. Ga.

(13) Occupation Machinist

(20) Number of children born to mother, including present birth 1

MOTHER

(14) Full Name of Mother Senora P. Roach

(15) Present Postoffice of Mother Union S.C.

(16) Color or Race W.

(17) Age at Last Birthday 23  
(Year)

(18) Birthplace Union Co. S.C.

(19) Occupation Domestic

(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 4 P. M. on the date above stated. (Hour A. M. or P. M.)

(23) (Signature) D. H. Roach

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

(26) Witness

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

(27) Filed 4-10 19 22

(28)

19 22  
Registrar

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.

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.