

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD—SEPARATE BLANKS FOR EACH CHILD, and Mark the
N. B.—In case of TWINS OR TRIPLETS use 2 SEPARATE BLANKS FOR EACH CHILD, and Mark the
FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

(1) PLACE OF BIRTH

County of Charleston S.C.
Township of Charleston S.C.
or Charleston S.C.
Inc. Town of Charleston S.C.
or Charleston S.C.
City of Charleston S.C.

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of Health

File No.—For State Registrar Only

585

Registration District No. 9 A Registered No. 167
(For use of Local Registrar)
(No. 21st St St. 21st 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 Dorothy May Mercer

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

(3) BOY OR GIRL girl (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Jan 18th 1922
(State Month (Day) (Year))

FATHER.

(8) FULL NAME Clayton B. Mercer
(9) PRESENT POSTOFFICE OF FATHER Charleston S.C.
(10) COLOR OR RACE colored (11) AGE AT LAST BIRTHDAY 22 (Years)
(12) BIRTHPLACE Charleston S.C.
(13) OCCUPATION Painter

MOTHER.

(14) NAME BEFORE MARRIAGE Luzerna C. Godfrey
(15) PRESENT POSTOFFICE OF MOTHER Charleston S.C.
(16) COLOR OR RACE colored (17) AGE AT LAST BIRTHDAY 18 (Years)
(18) BIRTHPLACE Charleston S.C.
(19) OCCUPATION Corn House Keeper

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

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

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born at 10 A.M.
(Born alive or stillborn) (Hour A. M. or P. M.)
on the date above stated.

(23) (Signature) alive

(24) State whether Physician or Midwife Midwife

(25) Address of Physician or Midwife 21st St

Given name added from a supplemental report

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

(27) Filed 2-6-22

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.