

## (1) PLACE OF BIRTH

County of

Township of

or

Inc. Town of

or

City of

## CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

13683

Registration District No. 4 a

Registered No. 19  
(For use of Local Registrar)

(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

Gene Elizabeth White

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

May 12, 1922

(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME

Harry L. White

(9) PRESENT POSTOFFICE OF FATHER

Bromley

(10) COLOR OR RACE

white

(11) AGE AT LAST BIRTHDAY

23

(Years)

(12) BIRTHPLACE

Johnston, S.C.

(13) OCCUPATION

U. S. Navy

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

1

## MOTHER.

(14) NAME BEFORE MARRIAGE

Ruth Louise Hughes

(15) PRESENT POSTOFFICE OF MOTHER

Bromley S.C.

(16) COLOR OR RACE

white

(17) AGE AT LAST BIRTHDAY

17

(Years)

(18) BIRTHPLACE

Bromley S.C.

(19) OCCUPATION

Domestic

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

1

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

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

(22) (Signature)

A. S. Shubley M.D.

(23) State whether Physician or Midwife

(24) Address of Physician or Midwife

Bromley, S.C.

Give name added from a supplemental report

(25) Witness

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

(26) Filed

5/14

1922

(27)

John Coover

Local Registrar

1922 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.