

(1) PLACE OF BIRTH

County of Darlington
Township of Fish Pond
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

6524

Registration District No. 402

Registered No. 16
(For use of Local Registrar)

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

(2) Full Name of Child

(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 Mar. 16, 1922
(Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME Richard Bush
(9) PRESENT POSTOFFICE OF FATHER Branchville S.C.
(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY (Years)
(12) BIRTHPLACE Darlington Co.
(13) OCCUPATION Farmer
(14) Number of children born to mother, including present birth 2

MOTHER.
(14) NAME BEFORE MARRIAGE Selis
(15) PRESENT POSTOFFICE OF MOTHER Branchville S.C.
(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY (Years)
(18) BIRTHPLACE Unknown
(19) OCCUPATION Domestic
(21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 12 M.,
(Born alive or stillborn) (Hour A. M. or P. M.)
(23) (Signature) Dorcas White Henderson
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Branchville

Given name added from a supplemental report

(26) Witness
(Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed 3/22 19 22 (28) J. C. ... 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.