

## (1) PLACE OF BIRTH

County of ... Washington  
 Township of ... Kingstree  
 Inc. Town of ... Kingstree  
 City of ... P.C.  
 (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

5423

Registration District No. 43 Registered No. Four  
 (For use of Local Registrar)

City of ... Wak Main (No. St.)  
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Bernice Ann Tucker 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 Feb. 12, 1923  
 To be answered only in event of Twin or Triplet (Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Charlie Tucker  
 (9) PRESENT POSTOFFICE OF FATHER Kingstree, SC  
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 37  
 (12) BIRTHPLACE Russia  
 (13) OCCUPATION Merchant  
 (20) Number of children born to mother, including present birth Two

## MOTHER.

(14) NAME BEFORE MARRIAGE Rose Berman  
 (15) PRESENT POSTOFFICE OF MOTHER Kingstree, SC  
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 24  
 (18) BIRTHPLACE Baltimore, Md.  
 (19) OCCUPATION Housewife  
 (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 ... Alive ... at 11:15 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) [Signature]

(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 mark)

(27) Filed Feb. 12, 1923

(28)

J. S. McGinty  
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.

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