

(1) PLACE OF BIRTH

County of

Township of

or

Inc. Town of

or

City of

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

(2) Full Name of Child

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

17955

Registration District No. 909

Registered No. 118

(For use of Local Registrar)

(No. Navy Yard St.; Ward)

Marstella Smalls

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

(3) BOY OR GIRL?

(4) Twin or Triplet?

(5) Number in order of birth

(6) Are Parents Married?

(7) DATE OF

BIRTH June 23 1922
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Paris Smalls

(9) PRESENT POSTOFFICE OF FATHER

Navy Yard

(10) COLOR OR RACE

col.

(11) AGE AT LAST BIRTHDAY

22
(Years)

(12) BIRTHPLACE

Charleston S. C.

(13) OCCUPATION

Common Labour

MOTHER.

(14) NAME BEFORE MARRIAGE

Victoria Cash

(15) PRESENT POSTOFFICE OF MOTHER

Navy Yard

(16) COLOR OR RACE

col.

(17) AGE AT LAST BIRTHDAY

16
(Years)

(18) BIRTHPLACE

Charleston S. C.

(19) OCCUPATION

House work

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

1

(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 7 A.M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

Lucy Washington

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Midwife

Given name added from a supplemental report

(26) Witness

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

(27) Filed

June 26 1922

(28)

C. F. Myers
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.