

**MARGIN RESERVED FOR BINDING.**

WHITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.

**N. B.**—In case of TWINE OR THROTTLES use a SEPARATE BLANK FOR EACH CHIEF, and mark the FIRST-ROUN, No. 1. THE OTHER, No. 2, etc., in question 5.

County of Charleston  
Township of Jackson  
or  
Inc. Town of \_\_\_\_\_  
or  
City of \_\_\_\_\_

# CERTIFICATE OF BIRTH

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

Registration District No. 905

File No.—For State Registrar Only

3484

Registered No. 0  
(For use of Local Registrar)

City of \_\_\_\_\_ (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

(3) BOY OR  
GIRL

(4) Twin or Triplet?

(5) Number in order of birth

To be answered only in case of Twins or Triplets

(B) Are Parents Married?

(7) DATE OF BIRTH Feb 19, 1922  
(Name of Month) (Day) (Year)

**FATHER**

(8) FULL NAME

(9) PRESENT  
POSTOFFICE  
OF FATHER

(10) COLOR OR RACE

(12) BIRTHPLACE

(U3) OCCUPATION

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

(11) AGE AT LAST BIRTHDAY... 37

Law Island

1912

## MOTHER

(14) NAME BEFORE MARRIAGE

(15) PRESENT  
POSTOFFICE  
OF MOTHER

(15) COLOR OR RACE

(18) BIRTHPLACE

**(10) OCCUPATION**

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

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE**

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

(23) (Signature)

(30) State whether Physician or Midwife

100-44361 of Bureau on 11/15/54

Given name added from a supplement  
tal report

(2) Witnesses

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

(27) Filed

FILED - 2019-04-25 (25) 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.