

THIS COPY IS RESERVED FOR RECORDING PURPOSES. PLEASE WRITE UP THIS IN A PERMANENT RECORD. N.B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5. McCaw, of Columbia.

**CERTIFICATE OF BIRTH**

County of Charleston S.C. STATE OF SOUTH CAROLINA.  
 Bureau of Vital Statistics  
 State Board of Health

File No.—For State Registrar Only  
**71725**

Township of .....  
 OR  
 Inc. Town of ..... Registration District No. 9A Registered No. 849  
 OR  
 City of Charleston S.C. (No. 4 Holmes St.) (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. Seth Pinkney } If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Boy (4) Twin or Triplet? None (5) Number in order of birth One (6) Are Parents Married? No. (7) DATE OF BIRTH Aug. 19<sup>th</sup> 1916  
(Name of Month) (Day) (Year)

**FATHER.**  
 (8) FULL NAME Les Pinkney  
 (9) PRESENT POSTOFFICE OF FATHER Charleston S.C.  
 (10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 25  
 (Years)  
 (12) BIRTHPLACE Charleston S.C.  
 (13) OCCUPATION Laborer  
 (20) Number of children born to mother, including present birth } One

**MOTHER.**  
 (14) NAME BEFORE MARRIAGE Rebecca Johnson  
 (15) PRESENT POSTOFFICE OF MOTHER Charleston S.C.  
 (16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 22  
 (Years)  
 (18) BIRTHPLACE Charleston S.C.  
 (19) OCCUPATION Nurse  
 (21) Number of children of this mother now living, including present birth } One

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\***

(22) I hereby certify that I attended the birth of this child, who was Born alive at 11:30 A.M.  
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Martha Howard  
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife 139 Wentworth St.

Given name added from a supplemental report  
 ..... 191.....  
 Registrar

(26) Witness .....  
 (Signature of Witness necessary only when question 23 is signed by mark)  
 (27) Filled 8/21 1916 (28) J. Marcus Green, M.D.  
 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.

~~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.~~