

(1) PLACE OF BIRTH

County of Charleston
 Township of
 or
 Inc. Town of
 or
 City of Charleston
 (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
29200

Registration District No. 9A Registered No. 1327
 (For use of Local Registrar)
 (No. 89 Nassau St.; Ward)

(2) Full Name of Child Rollin Marion Troublefield

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

(3) BOY OR GIRL <u>Boy</u>	(4) Twin or Triplet? To be answered only in event of Twins or Triplets	(5) Number in order of birth	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>Sept 8</u> 19 <u>22</u> (Name of month) (Day) (Year)
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FATHER.
 (8) FULL NAME Rollin Marion Troublefield
 (9) PRESENT POSTOFFICE OF FATHER Charleston S.C.
 (10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 27 (Years)
 (12) BIRTHPLACE Charleston S.C.
 (13) OCCUPATION Proprietor Pressing Club

MOTHER.
 (14) NAME BEFORE MARRIAGE Rachel Mobley
 (15) PRESENT POSTOFFICE OF MOTHER Charleston S.C.
 (16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 21 (Years)
 (18) BIRTHPLACE Savannah, Georgia
 (19) OCCUPATION domestic

(20) Number of children born to mother, including present birth Four
 (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 born alive at 12:40 P.M. on the date above stated.
 (Born alive or stillborn) (Hour A. M. or P. M.)
 (23) (Signature) E. R. Taylor M.D.
 (24) State whether Physician or Midwife
 (25) Address of Physician or Midwife 18 Radcliffe St

Given name added from a supplemental report

 19 ..
 Registrar

(26) Witness
 (Signature of Witness necessary only when question 23 is signed by mark)
 (27) Filed 9/13/22 1922 (28) J. Mercer Green

When there was no attending physician or midwife, then the father, household, 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.