

FORM NO. 2
MARRIAGE RECORDS
WHEN PLAIN, WITH NO ADDING IN—THIS IS A PERMANENT RECORD.
R. 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 6.

(1) PLACE OF BIRTH

County of Charleston

Township of

Inc. Town of

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

6121

840

Registration District No. 9A

Registered No.

(For use of Local Registrar)

(2) Full Name of Child Irvin Clayton Ridgeway

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

(3) SEX OF CHILD Boy

(4) Twin or triplet?

(5) Number in order of birth

(6) Are Parents Married Yes

(7) DATE OF BIRTH Feb. 26, 1923

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Theodore Ernest Ridgeway

(9) PRESENT POSTOFFICE OF FATHER Charleston, S.C.

(10) COLOR OR RACE White

(11) AGE AT LAST BIRTHDAY 39

(12) BIRTHPLACE Charleston County, S.C.

(13) OCCUPATION Collector C.C. Ry + Ry Co.

(14) Number of children born to mother, including present birth 4

MOTHER.

(14) NAME BEFORE MARRIAGE Claudia Murray

(15) PRESENT POSTOFFICE OF MOTHER Charleston, S.C.

(16) COLOR OR RACE White

(17) AGE AT LAST BIRTHDAY 28

(18) BIRTHPLACE Charleston, S.C.

(19) OCCUPATION Housewife

(20) Number of children of this mother now living, including present birth 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(21) I hereby certify that I attended the birth of this child, who was born at 12:30 A.M. on the date above stated. (Hour A. M.)

(22) (Signature) [Signature]

(23) State of South Carolina (24) Address of Physician or Midwife Physician 8 Wentworth St.

Given name added from a supplemental report

(25) Witness (Signature of Witness) [Signature]

(26) Filed 3/5/23 (27) Local Registrar [Signature]

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.

State Board of Health