

## (1) PLACE OF BIRTH

# CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only  
**25160**

County of Charleston

Township of .....

or

Inc. Town of .....

or

City of CharlestonRegistration District No. 9ARegistered No. 1224

(For use of Local Registrar)

(No. 1 to Morning St St. 4 Ward)

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

2) Full Name of Child Charles Irving

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

3) BOY OR GIRL? boy(4) Twin or Triplet? /(5) Number in order of birth /

To be answered only in event of Twins or Triplets

(6) Are Parents Married? yes(7) DATE OF BIRTH Aug. 25 1923

(Name of Month) (Day) (Year)

9) FULL NAME Samuel James Irving9) PRESENT POSTOFFICE OF FATHER Charleston(10) COLOR OR RACE negro(11) AGE AT LAST BIRTHDAY 20

(Years)

(12) BIRTHPLACE Charleston(13) OCCUPATION Porter(14) NAME BEFORE MARRIAGE Florence Dubose(15) PRESENT POSTOFFICE OF MOTHER Charleston(16) COLOR OR RACE negro(17) AGE AT LAST BIRTHDAY 20

(Years)

(18) BIRTHPLACE Charleston(19) OCCUPATION house keeper(20) Number of children born to mother, including present birth 2(21) Number of children of this mother now living, including present birth 2

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

22) I hereby certify that I attended the birth of this child, who was born at 1045 9 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Philippe T. T. T.(24) State whether Physician or Midwife midwife (25) Address of Physician or Midwife 8 Montague St(26) Witness J. G. Green

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

(27) Filed 8/30/23 191 1224 Local Registrar

Given name added from a supplemental report

..... 191....

..... 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.