

(1) PLACE OF BIRTH

County of

Township of

or
Inc. Town ofCity of Charleston

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

2) Full Name of Child

Melton Weaver Jr.

File No.—For State Registrar Only

10253

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

9 A

Registration District No.

Registered No.

(For use of Local Registrar)

St.; Ward)

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

(6) Are Parents Married Yes

(7) DATE OF BIRTH

4 8 22

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

James Melton Weaver Jr.

(9) PRESENT POSTOFFICE OF FATHER

5 Trappan

(10) COLOR OR RACE

B

(11) AGE AT LAST BIRTHDAY

28

(Years)

(12) BIRTHPLACE

Cow way SC

(13) OCCUPATION

 Carpenter

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

3

MOTHER.

(15) NAME BEFORE MARRIAGE

Carrie Pears

(16) PRESENT POSTOFFICE OF MOTHER

Charleston SC

(17) COLOR OR RACE

B

(18) AGE AT LAST BIRTHDAY

28

(Years)

(19) BIRTHPLACE

Jammerville S.C.

(20) OCCUPATION

Domestic

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

1-

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 6 A.M. (Hour A.M. or P.M.) (Born alive or stillborn)

on the date above stated.

(23) (Signature) Dr. B. H. H. H.

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Mid-Chas A C

Given name added from a supplemental report

101

Registrar

(26) Witness

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

(27) Filed

7/10/22

(28)

J. M. 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.

OF CERTIFICATION

OF SOUTH CAROLINA