

## (1) PLACE OF BIRTH

County of Greenville  
 Township of Chick Springs  
 or  
 Inc. Town of .....  
 or  
 City of .....

## CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

18776

Registration District No. 2204 Registered No. 76  
 (For use of Local Registrar)

(No. .... St.; .... Ward)  
 If birth occurs in a hospital or other institution, give name of same instead of street and number.

(2) Full Name of Child Sarah Eugene Berry If child is not yet named, make supplemental report as directed

3) BOY OR GIRL? girl 4) Twin or Triplet? No 5) Number in order of birth 1 6) Are Parents Married? yes 7) DATE OF BIRTH June 5 1922  
 To be answered only in case of Twins or Triplets (Name of Month) (Day) (Year)

## FATHER.

8) FULL NAME Samuel Berry  
 9) PRESENT POSTOFFICE OF FATHER Greenville  
 10) COLOR OR RACE B 11) AGE AT LAST BIRTHDAY 35 (Years)  
 12) BIRTHPLACE SC  
 13) OCCUPATION laborer  
 20) Number of children born to mother, including present birth one

## MOTHER.

14) NAME BEFORE MARRIAGE Luella B. Scott  
 15) PRESENT POSTOFFICE OF MOTHER Greenville  
 16) COLOR OR RACE B 17) AGE AT LAST BIRTHDAY 35 (Years)  
 18) BIRTHPLACE SC  
 19) OCCUPATION domestic  
 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 alive at 11 M.,  
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Hattie Watson(24) State whether Physician or Midwife midwife(25) Address of Physician or Midwife Greenville SC

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

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

(27) Filed 6-20 19 22 (28) James 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.