

(1) PLACE OF BIRTH

County of Charleston
Township of Charleston
OR
Inc. Town of
OR
City of

CERTIFICATE OF BIRTH

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

Registration District No. 17.02 Registered No. 54
(For use of Local Registrar)

File No. For State Registrar Only
42169

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

(2) Full Name of Child

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

(3) BOY OR GIRL? Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Dec 21 1932
(Name of Month) (Day) (Year)

FATHER.

MOTHER.

(8) FULL NAME Calvin W. P. P. P. (14) NAME BEFORE MARRIAGE Calvin W. P. P. P.
(9) PRESENT POSTOFFICE OF FATHER Summerville, S. C. (15) PRESENT POSTOFFICE OF MOTHER Summerville, S. C.
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 45 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 33
(12) BIRTHPLACE Summerville, S. C. (18) BIRTHPLACE Summerville, S. C.
(13) OCCUPATION Farmer (19) OCCUPATION Farmer
(20) Number of children born to mother, including present birth 1 (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 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) John D. P. P. (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Summerville, S. C.

Given name added from a supplemental report

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

(27) Filed DEC 21 1932 (28) John D. P. P. 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.