

Form No. 1

(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

582

County of CharlestonTownship of St. Jamesor
Inc. Town of McClellanvilleor
City ofRegistration District No. 706Registered No. 7
(For use of Local Registrar)

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

(2) Full Name of Child Russie Neathus If child is not yet named, make supplemental report as directed

(3) SEX OR ONLY <u>Girl</u>	(4) Type or <u>Trunk</u> To be covered only in case of Trunk or Trunk	(5) Number in order of birth <u>1</u>	(6) Age at birth <u>22</u>	(7) DATE OF BIRTH <u>June 28</u> 19 <u>22</u> (Month of Month) (Day) (Year)
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FATHER.		MOTHER.	
(8) FULL NAME <u>Tom Neathus</u>	(14) NAME BEFORE MARRIAGE <u>Nancy Jenkins</u>	(9) PRESENT POSTOFFICE OF FATHER <u>Fairlee</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Fairlee</u>
(10) COLOR OR RACE <u>Negro</u>	(11) AGE AT LAST BIRTHDAY <u>22</u> (Year)	(16) COLOR OR RACE <u>Negro</u>	(17) AGE AT LAST BIRTHDAY <u>18</u> (Year)
(12) BIRTHPLACE <u>Charleston Co</u>	(18) BIRTHPLACE <u>Charleston Co</u>	(13) OCCUPATION <u>Day Laborer</u>	(19) OCCUPATION <u>Domestic Laborer</u>
(20) Number of children born to mother, including present birth <u>1</u>	(21) Number of children of this mother now living, including present birth <u>1</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 12 P. M.
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Nancy Jenkins
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife FairleeGiven name added from a supplement-
tal report 1(26) Witness (Signature of Witness necessary only
when question 23 is signed by mark)(27) Filed July 7 1922 (28) Geo E. Bacon
Registrar 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 stillborns
before the fifth month of pregnancy.