

(1) PLACE OF BIRTH

County of Berkeley  
Township of St. John  
or  
Inc. Town of \_\_\_\_\_  
or

CERTIFICATE OF BIRTH

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

File No. - For State Registrar Only

10117

Registration District No. 702

Registered No. 35  
(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 Elva Marie Devine (If child is not yet named, make supplemental report as directed)

(3) SEX-OR GIRL girl (4) Twin or Triplet? \_\_\_\_\_ (5) Number in order of birth \_\_\_\_\_ (6) Are Parents Married? yes (7) DATE OF BIRTH Apr 16 1922  
(Name of Month) (Day) (Year)  
To be answered only in case of Twin or Triplet

FATHER

(8) FULL NAME Oscar Devine

(9) PRESENT POSTOFFICE OF FATHER Bowman SC

(10) COLOR OR RACE  negro (11) AGE AT LAST BIRTHDAY 20 (Year)

(12) BIRTHPLACE Berkeley co SC

(13) OCCUPATION Farmer

(14) Number of children born to mother, including present birth 11

MOTHER

(14) NAME BEFORE MARRIAGE Mary Jane Thompson

(15) PRESENT POSTOFFICE OF MOTHER Bowman SC

(16) COLOR OR RACE  negro (17) AGE AT LAST BIRTHDAY 18 (Year)

(18) BIRTHPLACE Berkeley co SC

(19) OCCUPATION Housewife

(21) Number of children of this mother now living, including present birth 11

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature) Charles L. ... (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Bowman SC

Given name added from a supplemental report.

(26) Witness Oscar Devine (Signature of Witness necessary only when question 22 is signed by mark)

(27) Filed 4/24/22 at P. A. Lincoln 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 required if stillborn before the 24th month of pregnancy.