

(1) PLACE OF BIRTH

County of Berkeley
 Township of 1st 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. 702Registered No. 35
(For use of Local Registrar)

City of _____ (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 Ella Mener 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)

FATHER.

(8) FULL NAME Oscar Devine
 (9) PRESENT POSTOFFICE OF FATHER Bonham S.C.
 (10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 20 (Years)
 (12) BIRTHPLACE Berkeley co. S.C.
 (13) OCCUPATION Farmer

MOTHER.

(14) NAME BEFORE MARRIAGE Mary Jane Thompson
 (15) PRESENT POSTOFFICE OF MOTHER Bonham S.C.
 (16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 18 (Years)
 (18) BIRTHPLACE Berkeley co. S.C.
 (19) OCCUPATION Housewife
 (20) Number of children born to mother, including present birth 11
 (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. Lingo
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Bonham S.C.

Given name added from a supplemental report.
 (26) Witness Oscar Devine (Signature of Witness necessary only when question 23 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 last month of pregnancy.