

## (1) PLACE OF BIRTH

County of Berkley  
 Township of 2. S.  
 OF  
 Inc. Town of Jamur  
 OR  
 City of .....

## CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

6619

Registration District No. 20.1 Registered No. 2.11  
 (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

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

(3) BOY OR GIRL <u>Girl</u>	(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>March 19 1922</u> (Name of Month) (Day) (Year)
FATHER			MOTHER	
(8) FULL NAME <u>W. J. White</u>			(14) NAME BEFORE MARRIAGE <u>Huggins</u>	
(9) PRESENT POSTOFFICE OF FATHER <u>Summerville</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Summerville</u>	
(10) COLOR OR RACE <u>White</u>			(16) COLOR OR RACE <u>White</u>	
(11) AGE AT LAST BIRTHDAY <u>Mar 1922</u> (Years)			(17) AGE AT LAST BIRTHDAY <u>Mar 1922</u> (Years)	
(12) BIRTHPLACE <u>Berkley</u>			(18) BIRTHPLACE <u>Berkley</u>	
(13) OCCUPATION <u>Jamur</u>			(19) OCCUPATION <u>house work</u>	
(20) Number of children born to mother, including present birth <u>17</u>			(21) Number of children of this mother now living, including present birth <u>7</u>	

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was... Julia Adams ...at... 470 ...M.,  
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplement  
 tal report

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

(27) Filed Mar 20 1922 (28) R. L. Harmon  
 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 stillbirths  
 before the fifth month of pregnancy.