

1. PLACE OF BIRTH

City of BethCounty of BethState of South Carolina

# CERTIFICATE OF BIRTH STATE OF SOUTH CAROLINA Bureau of Vital Statistics State Board of Health

File No. — For State Registrar Only

10076

Registration District No. LowRegistered No. 37  
(For use of Local Registrar)City of Paris Island (No. 1 St.; Ward)  
Hospital or other institution, give name of same instead of street and number.)Full Name of Child Edna Maria Chaney  
If child is not yet named, make supplemental report as directed.(5) Number in  
order of birth  
1st  
Is the child living only in event of twins or triplets(6) Are  
Parents  
Married? yes(7) DATE OF  
BIRTH April 5 1922  
(Name of Month) (Day) (Year)FATHER.  
NAME John Jay Chaney  
RESIDENCE Paris Island S.C.AGE AT LAST  
BIRTHDAY 22  
(Years)BIRTHPLACE  
Sea asOCCUPATION  
SalvageMOTHER.  
(14) NAME BEFORE  
MARRIAGE Ruby Bullock(15) PRESENT  
POSTOFFICE  
OF MOTHER Paris Island S.C.(16) COLOR  
OR  
RACE white (17) AGE AT LAST  
BIRTHDAY 19  
(Years)(18) BIRTHPLACE  
Sea as(19) OCCUPATION  
Housewife(21) Number of children of this mother  
now living, including present birth OneI hereby certify that I attended the birth of this child, who was born alive at 11:15 P. M.,  
on the date above stated. (Hour A. M. or P. M.)(23) (Signature) Richard B. Shea  
(24) State whether Physician or Midwife. (25) Address of Physician or Midwife  
M.D. Paris Island S.C.Enter name added from a supplement-  
al report(26) Witness (Signature of Witness necessary only  
when question 23 is signed by mark)(27) Filed April 14 1922 (28) W. H. K. K.  
Local RegistrarWhen 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.  
before the fifth month of pregnancy.