

## (1) PLACE OF BIRTH

County of Long  
 Township of Congaree  
 or  
 Inc. Town of .....  
 or  
 City of North Charleston

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

No. for State Registrar Only  
**25342**

Registration District No. 3100 Registered No. 76  
 (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 Rex Rush If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Boy (4) Twin or Triplet One (5) Number in order of birth Six (6) Are Parents Married? Yes (7) DATE OF BIRTH Feb 11 1923  
 (Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Jasper S. Rush  
 (9) PRESENT POSTOFFICE OF FATHER North Charleston  
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 40  
 (Year) (12) BIRTHPLACE SC  
 (13) OCCUPATION  Carpenter  
 (14) Number of children born to mother, including present birth Six

## MOTHER.

(14) NAME BEFORE MARRIAGE Lula Cooper  
 (15) PRESENT POSTOFFICE OF MOTHER North Charleston  
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 34  
 (Year) (18) BIRTHPLACE SC  
 (19) OCCUPATION Domestic  
 (20) Number of children of this mother now living, including present birth Six

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(21) I hereby certify that I attended the birth of this child, who was White at 12:40 M., on the date above stated. (Born alive or stillborn) (Hour, M. or P. M.)

(22) (Signature) [Signature]

(24) State whether Physician or Midwife

(23) Address of Physician or Midwife

(Given name added from a supplemental report)

(25) Witness

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

10/27/45  
 19 SP  
 Registrar

(27) Filed 9/6

19 23

(28)

J. C. Lybrand  
 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.

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