

## (1) PLACE OF BIRTH

County of CharlestonTownship of Edisto Island

or

Inc. Town of .....

or

City of .....

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

## CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

25225

Registration District No. 902Registered No. 4440  
(For use of Local Registrar)(2) Full Name of Child Martina Youngs

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

(3) BOY OR GIRL

Girl

(4)

Twin or Triplet?

To be answered only in case of Twin or Triplets

(5)

Number in order of birth

(6)

Are Parents Married?

no

(7)

DATE OF BIRTH

Aug. 9, 1922  
(Name of Month) (Day) (Year)

## FATHER.

## MOTHER.

(8) FULL NAME

Don't know

(14) NAME BEFORE MARRIAGE

Martina Youngs

(9) PRESENT POSTOFFICE OF FATHER

" "

(15) PRESENT POSTOFFICE OF MOTHER

Edisto Island, S.C.

(10) COLOR OR RACE

" "

(11) AGE AT LAST BIRTHDAY

(Years)

(16) COLOR OR RACE

Negro

(17) AGE AT LAST BIRTHDAY

(Years)

(12) BIRTHPLACE

" "

(18) BIRTHPLACE

S.C.

(13) OCCUPATION

" "

(19) OCCUPATION

Farmer

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

1

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

1

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was... alive ... at 3 P.M. on the date above stated.  
(Born alive or stillborn) (Hour A. M. or P. M.)

(23)

(Signature)

Lura L. Richards

(24)

State whether Physician or Midwife

Midwife

(25) Address of Physician or Midwife

Edisto Island, S.C.

Given name added from a supplemental report

(26) Witness

Wm. Murray

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

(27)

Filed Aug. 24, 1922(28) Wm. Murray

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.