

(1) PLACE OF BIRTH

County of

Township of

or

Inc. Town of

or

City of

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

31631

Registration District No. 3605

Registered No. 72

(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 Charlie Chancey If child is not yet named, make supplemental report as directed(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parent Married? Yes (7) DATE OF BIRTH Sept 3, 1922
(Name of Month) (Day) (Year)FATHER. FULL NAME Charlie Chancey MOTHER. NAME BEFORE MARRIAGE Curlic Green

(8) PRESENT POSTOFFICE OF FATHER (9) PRESENT POSTOFFICE OF MOTHER

(10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 22 (12) BIRTHPLACE SC (13) OCCUPATION Labr
(Years) (Years)(14) NAME BEFORE MARRIAGE Curlic Green (15) PRESENT POSTOFFICE OF MOTHER (16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 19 (18) BIRTHPLACE SC (19) OCCUPATION Labr
(Years) (Years)(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 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Nellie Desso (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Dist 12, 22, 750 N. 9th St.

Given name added from a supplemental report

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

(27) Filed Dist 12, 22, 750 N. 9th St. (28) 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.