

## (1) PLACE OF BIRTH

County of ClarendonTownship of Lawrenceburg

Inc. Town of.....

City of.....

## CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

3786

Registration District No. 13.153 Registered No. 7

(For use of Local Registrar)

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

(2) Full Name of Child Mossley Le Roy Touchberry

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

(3) BOY OR GIRL <u>Boy</u>	(4) Twin or Triplet? <u>✓</u>	(5) Number in order of birth <u>2</u>	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>February 11, 1922</u>
To be answered only in event of Twins or Triplets			(Name of Month) (Day) (Year)	

## FATHER.

(8) FULL NAME Joseph Jefferson Touchberry(9) PRESENT POSTOFFICE OF FATHER Manning, S.C.(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 28 (Years)(12) BIRTHPLACE Clarendon Co., S.C.(13) OCCUPATION Manning(20) Number of children born to mother, including present birth 4

## MOTHER.

(14) NAME BEFORE MARRIAGE Edna Nell Gibson(15) PRESENT POSTOFFICE OF MOTHER Manning, S.C.(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 22 (Years)(18) BIRTHPLACE Pamlico, S.C.(19) OCCUPATION Housewife(21) Number of children of this mother now living, including present birth Three

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 4 P. M. on this date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Charles B. Gibson(24) State whether Physician or Midwife (25) Address of Physician or Midwife Manning, S.C.

Given name added from a supplemental report

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

(27) Filed Feb 12, 1922 (28) A. J. White 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.