

(1) PLACE OF BIRTH

County of Charleston

Township of

or
Inc. Town ofor
City of Charleston

(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

71768

Registration District No. 28 Sumter StRegistered No. 902

(For use of Local Registrar)

St.; Ward)

(2) Full Name of Child William Edward Glover

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

(3) BOY OR GIRL? Boy

(4) Twin or Triplet?

(5) Number in order of birth

(6) Are Parents Married? Yes

(7) DATE OF BIRTH

(Name of Month) (Day) (Year)

To be answered only in event of Twins or Triplets

FATHER.

(8) FULL NAME

Anthony J. Glover

(9) PRESENT POSTOFFICE OF FATHER

28 Sumter St

(10) COLOR OR RACE

Colored

(11) AGE AT LAST BIRTHDAY

41
(Years)

(12) BIRTHPLACE

Berkley Co. - SC.

(13) OCCUPATION

Porter - at Sho Store

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

Two

MOTHER.

(14) NAME BEFORE MARRIAGE

Elizabeth Mazzyck

(15) PRESENT POSTOFFICE OF MOTHER

28 Sumter St.

(16) COLOR OR RACE

Colored

(17) AGE AT LAST BIRTHDAY

31
(Years)

(18) BIRTHPLACE

Berkley Co. SC.

(19) OCCUPATION

House wife

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

Two

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Alive at 6:40 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

Levellene M. Shorn, M.D.

(24) State whether Physician or Midwife

Physician

(25) Address of Physician or Midwife

186 Cumming St

Given name added from a supplemental report

191.....

Registrar

(26) Witness

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

(27) Filed

191.....

(28)

J. Meritt Green, M.D.
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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