

MARGIN RESERVED FOR BINDING.
 WHITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
 N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

(1) PLACE OF BIRTH
 County of Charleston
 Township of _____
 Inc. Town of Charleston
 or _____
 City of _____

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

File No.—For State Registrar Only
596

Registration District No. 9-13 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 George Campbell 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 Jan 3 1922
 (State of Month) (Day) (Year)

FATHER.
 (8) FULL NAME Archib Campbell
 (9) PRESENT POSTOFFICE OF FATHER Mt Pleasant S C
 (10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 39
 (Year)
 (12) BIRTHPLACE Mt Pleasant S C
 (13) OCCUPATION Laborer
 (20) Number of children born to mother, including present birth 17

MOTHER.
 (14) NAME BEFORE MARRIAGE Elloise Mack
 (15) PRESENT POSTOFFICE OF MOTHER Mt Pleasant S C
 (16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 30
 (Year)
 (18) BIRTHPLACE Charleston C
 (19) OCCUPATION Laborer
 (21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was above at 11 A M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) H. Brown (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Mt Pleasant S C

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 25 is signed by mark) Benjamin
 (27) Filed Jan 13 1922 (28) Local Registrar Benjamin

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.