

## (1) PLACE OF BIRTH

County of Darlington  
 Township of Darlington

## CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

18300

Inc. Town of ..... Registration District No. 1.3.0 Registered No. 49  
 (For use of Local Registrar)  
 City of Darlington (No. 2.6.5 West Broad 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 Ralph Edward Dooking If child is not yet named, make supplemental report as directed

(3) SEX OR REL? Male (4) Twin or triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH June 10, 1922  
 (Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME James Dooking

(9) PRESENT POSTOFFICE OF FATHER Marston St.

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 34 (Years)

(12) BIRTHPLACE Darlington S.C.

(13) OCCUPATION in shoe mechanics

(14) Number of children born to mother, including present birth 4

## MOTHER.

(14) NAME BEFORE MARRIAGE Wessaline J. Dooking

(15) PRESENT POSTOFFICE OF MOTHER Darlington S.C.

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 23 (Years)

(18) BIRTHPLACE Darlington S.C.

(19) OCCUPATION at home

(20) Number of children of this mother now living, including present birth 4

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was alive at 2:20 A.M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) E. E. Edwards

(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Darlington 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 July 1, 1922 (28) E. O. Farley 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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