

## (1) PLACE OF BIRTH

County of Charleston

Township of .....

or

Inc. Town of .....

or

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

6725

Registration District No. 9.A.Registered No. 328

(For use of Local Registrar)

(No. Therapy Laboratory Dept. Ward)(2) Full Name of Child Elizabeth Spague

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

(3) BOY OR GIRL

girl

(4) Twin or Triplet?

To be answered only in event of Twins or Triplets

(5) Number in order of birth

2

(6) Are Parents Married?

yes

(7) DATE OF

BIRTH June 20th 1922

(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME

Collier - T. Spague 3rd

(9) PRESENT POSTOFFICE OF FATHER

99 Westworth St. -  
Char. S.C.

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

43

(Years)

(12) BIRTHPLACE

Revere, Mass.

(13) OCCUPATION

Surgeon - in U. S. N.

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

One

(14) NAME BEFORE MARRIAGE

Elba B. B. B.

(15) PRESENT POSTOFFICE OF MOTHER

99 Westworth St. -  
Char. S.C.

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

25

(Years)

(18) BIRTHPLACE

Cambridge, Mass.

(19) OCCUPATION

Wife

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

One

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive or stillborn (Hour A. M. 6:30 P. M. 10:30) on the date above stated.

(23) (Signature)

(24) State whether Physician or Midwife

(25) Address of Physician

Wife

Given name added from a supplemental report

(26) Witness

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

(27) Filed

3/4 1922 W. H. Green M.D.

Registrar

Registrar

\*When there was no attending physician or midwife, then the father, householder, etc., should make report as stillborn. If a child breathes even once, it must not be reported as stillborn. No report is desired of stillborn before 15th month of pregnancy.

Registrar

Filed 3/22 1922  
Corrected Nov 20 1922