

(1) PLACE OF BIRTH

County of Sumner  
 Township of Wade  
 or  
 Inc. Town of Ate #1  
 or  
 City of Ware Shoals

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

File No. For State Registrar Only  
31000

Registration District No: 2907 Registered No. 58  
 (For use of Local Registrar)

(No. .... 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 Charley Benjamin (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 Sept 28 1922  
 (Name of Month) (Day) (Year)

**FATHER.**

(8) FULL NAME John Hill McBrine  
 (9) PRESENT POSTOFFICE OF FATHER Ware Shoals #1 S.C.  
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 33 (Years)  
 (12) BIRTHPLACE Laurin S.C.  
 (13) OCCUPATION Farmer

**MOTHER.**

(14) NAME BEFORE MARRIAGE Minnie Bock  
 (15) PRESENT POSTOFFICE OF MOTHER Ware Shoals #1 S.C.  
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 29 (Years)  
 (18) BIRTHPLACE Laurin S.C.  
 (19) OCCUPATION House Wife  
 (20) Number of children born to mother, including present birth 4 (21) 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 8:43 M.  
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. L. Dorman  
 (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Ware Shoals, 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 Oct 10 1922 (28) J. B. Burt 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.