

(1) PLACE OF BIRTH

County of Chas

Township of

or

Inc. Town of

or

City of Chas

(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

6860

Registration District No. 9ARegistered No. 475
(For use of Local Registrar)(2) Full Name of Child Ruby Chapman

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

(3) BOY OR GIRL? girl

(4) Twin or Triplet?

(5) Number in order of birth

To be answered only in case of Twins or Triplets

(6) Are Parents Married? Yes(7) DATE OF BIRTH Mar 12 1922
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Albert Chapman(9) PRESENT POSTOFFICE OF FATHER Charleston S.C.(10) COLOR OR RACE C (11) AGE AT LAST BIRTHDAY 37 (Years)(12) BIRTHPLACE Charleston(13) OCCUPATION Shoemaker(14) Number of children born to mother, including present birth 6

MOTHER.

(14) NAME BEFORE MARRIAGE Mary Stanard(15) PRESENT POSTOFFICE OF MOTHER Charleston S.C.(16) COLOR OR RACE C (17) AGE AT LAST BIRTHDAY 27 (Years)(18) BIRTHPLACE Charleston S.C.(19) OCCUPATION Washer(20) Number of children of this mother now living, including present birth 6

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Male at 10 P.M.
(Born alive or stillborn) (Hour A. M. or P. M.)
on the date above stated.(23) (Signature) [Signature](24) State whether Physician or Midwife (25) Address of Physician or Midwife 156 Sum 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 3/13/22 191..... (28) J. Marcus Green H.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.

Registrar. [Signature]Filed 3/28 1922 Corrected NOV 20 1922