

WRITE 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 8.

(1) PLACE OF BIRTH

County of Charleston
Township of Johns Island
or
Inc. Town of
or
City of (No. St. Ward)

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

621

Registration District No. 9.2.5 Registered No. 7
(For use of Local Registrar)

(2) Full Name of Child Mildred Brown

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

(3) BOY-OR-GIRL? <u>Girl</u>	(4) Twin or Triplet? <u>No</u> To be answered only in event of Twins or Triplets	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Jan. 21, 1922</u> (Free of Month) (Day) (Year)
FATHER.			MOTHER.	
(8) FULL NAME <u>John Brown</u>	(14) NAME BEFORE MARRIAGE <u>Fannie Baskin</u>			
(9) PRESENT POSTOFFICE OF FATHER <u>Pinebluff</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Johns Island</u>			
(10) COLOR OR RACE <u>negro</u>	(11) AGE AT LAST BIRTHDAY <u>21</u> (Years)	(16) COLOR OR RACE <u>negro</u>	(17) AGE AT LAST BIRTHDAY <u>30</u> (Years)	
(12) BIRTHPLACE <u>Johns Island</u>	(18) BIRTHPLACE <u>Johns Island</u>			
(13) OCCUPATION <u>Factory Laborer</u>	(19) OCCUPATION <u>Johns Island</u>			
(20) Number of children born to mother, including present birth <u>Three</u>	(21) Number of children of this mother now living, including present birth <u>Two</u>			

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature) Rose Williams
(24) State whether Physician or Midwife midwife (25) Address of Physician or Midwife Johns Island

Given name added from a supplemental report

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

(27) Filed Jan. 30, 1922 (28) Mrs. C. M. Hills 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.