

MARGIN RESERVED FOR BINDING.

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 5.

RECAP OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH		CERTIFICATE OF BIRTH		File No.—For State Registrar Only	
County of <u>Charleston</u>		STATE OF SOUTH CAROLINA		40691	
Township of <u>Bull Pond</u>		Bureau of Vital Statistics			
Inc. Town of.....		State Board of Health			
City of.....		Registration District No. <u>4482</u>		Registered No. <u>71</u>	
(No. St. Ward)		(For use of Local Registrar)			
(2) Full Name of Child <u>Julia Jones</u>		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>		(5) Number in order of birth <u>1</u>	
(6) Are Parents Married? <u>Yes</u>		(7) DATE OF BIRTH <u>Dec 22</u>		(8) (Name of Month) (Day) (Year)	
FATHER.		MOTHER.			
(9) FULL NAME <u>Tom Jones</u>		(14) NAME BEFORE MARRIAGE <u>Ann Charlton</u>			
(10) PRESENT POSTOFFICE OF FATHER <u>Barton</u>		(15) PRESENT POSTOFFICE OF MOTHER <u>Barton</u>			
(11) COLOR OR RACE <u>Colored</u>		(12) AGE AT LAST BIRTHDAY <u>21</u>			
(13) BIRTHPLACE <u>Bull Pond S.C.</u>		(16) COLOR OR RACE <u>Colored</u>		(17) AGE AT LAST BIRTHDAY <u>32</u>	
(18) OCCUPATION <u>Farmer</u>		(19) BIRTHPLACE <u>Bull Pond S.C.</u>			
(20) OCCUPATION <u>Farmer's wife</u>		(21) Number of children of this mother now living, including present birth <u>1</u>			
CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*					
(22) I hereby certify that I attended the birth of this child, who was at M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)					
(23) (Signature) <u>Belia Saxon</u>					
(24) State whether Physician or Midwife <u>midwife</u>					
(25) Address of Physician or Midwife <u>Charleston</u>					
Given name added from a supplemental report <u>Belia Saxon</u>					
(26) Witness (Signature of Witness necessary only when question 23 is signed by mark) <u>J. R. Rouse</u>					
(27) Filed <u>Dec 22</u> (28) <u>J. R. Rouse</u> 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.