

WRITE MAINLY 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.

McGAW OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Greene  
Township of Chattahoochee  
or  
Inc. Town of .....  
or  
City of .....

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

43887

Registration District No. 3501... Registered No. 21...  
(For use of Local Registrar)

City of ..... (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 Margie Cora L. Nicholas { If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? <u>girl</u>	(4) Twin or Triplet? <u>To be answered only in event of Twins or Triplets</u>	(5) Number in order of birth	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>Dec 22</u> 19 <u>22</u> (Name of Month) (Day) (Year)
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FATHER.

(8) FULL NAME Fred Nicholas  
(9) PRESENT POSTOFFICE OF FATHER mt Rest S.C.  
(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 21 (Years)  
(12) BIRTHPLACE Greene S.C.  
(13) OCCUPATION Farming  
(20) Number of children born to mother, including present birth One

MOTHER.

(14) NAME BEFORE MARRIAGE Mae Ridley  
(15) PRESENT POSTOFFICE OF MOTHER mt Rest S.C.  
(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 18 (Years)  
(18) BIRTHPLACE Ga  
(19) OCCUPATION Home 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 alive at 1 0 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) B. C. Ridley  
(24) State whether Physician or Midwife (25) Address of Phys. or Midwife mt Rest 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 Jan 1 19 23 (28) W. R. Hunt 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.