

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.

MOGAW OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Sumter
 Township of 5
 OR
 Inc. Town of
 OR
 City of

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)
 (No. St.; Ward)

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only
20053

Registration District No. 3-2-2 Registered No. 34
 (For use of Local Registrar)

(2) Full Name of Child Robert Lindsay

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 June 25, 1922
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Robert Lindsay
 (9) PRESENT POSTOFFICE OF FATHER Waples
 (10) COLOR OR RACE W (11) AGE AT LAST BIRTHDAY 20
 (Year)
 (12) BIRTHPLACE W
 (13) OCCUPATION W
 (14) Number of children born to mother, including present birth 4

MOTHER.

(14) NAME BEFORE MARRIAGE Lester
 (15) PRESENT POSTOFFICE OF MOTHER Waples
 (16) COLOR OR RACE W (17) AGE AT LAST BIRTHDAY 22
 (Year)
 (18) BIRTHPLACE W
 (19) OCCUPATION W
 (21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) Harsh Bakulow midwife

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Waples

Given name added from a supplemental report

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

(27) Filed June 25, 1922 (28) D. J. Jester
 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.