

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 questions 1

(1) PLACE OF BIRTH

County of Richmond
Township of
or
Inc. Town of
or
City of Columbia

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

File No.—For State Registrar Only

37412

Registration District No. 38a Registered No. 953
(For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Pauline James Loukos (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL girl (4) Twin or Triplet No (5) Number in order of birth 1 (6) Are Parents Married yes (7) DATE OF BIRTH Nov 12 1923
(Name of Month) (Day) (Year)

FATHER
(8) FULL NAME James Loukos

(9) PRESENT POSTOFFICE OF FATHER Columbia S.C.

(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 35
(Year)

(12) BIRTHPLACE Sparta, Greece

(13) OCCUPATION Stone Keeper

(14) Number of children born to mother, including present birth 2

MOTHER
(14) NAME BEFORE MARRIAGE Pauline Sgouropoulos

(15) PRESENT POSTOFFICE OF MOTHER Columbia S.C.

(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 22
(Year)

(18) BIRTHPLACE Sparta Greece

(19) OCCUPATION Home wife

(20) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(21) I hereby certify that I attended the birth of this child, who was alive at 10 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(22) (Signature) W. H. Rice (23) State whether Physician or Midwife mid (24) Address of Physician or Midwife 1317 Folly St

(Given name added from a supplemental report)
C. H. Miller (44)
April 13 1923
Registrar

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

(26) Filed Dec 21 1923 (27) G. L. Sloan 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

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