

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.

(1) PLACE OF BIRTH
County of William
Township of
or
Inc. Town of
or
City of Columbia
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

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

File No.—For State Registrar Only
19982

Registration District No. 584 Registered No. 1483
(For use of Local Registrar)

(2) Full Name of Child Margarette Walton (No. 1 St.; Ward)
(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 case of Twins or Triplets	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>No</u>	(7) DATE OF BIRTH <u>Le. 22 1922</u> (Name of Month) (Day) (Year)
(8) FULL NAME <u>John Walton</u>		(9) PRESENT POSTOFFICE OF FATHER <u>Columbia</u>		
(10) COLOR OR RACE <u>White</u>		(11) AGE AT LAST BIRTHDAY <u>23</u> (Years)		
(12) BIRTHPLACE <u>East Order</u>		(13) OCCUPATION <u>Farmer</u>		
(14) NAME BEFORE MARRIAGE <u>Margarette Walton</u>		(15) PRESENT POSTOFFICE OF MOTHER <u>Columbia</u>		
(16) COLOR OR RACE <u>White</u>		(17) AGE AT LAST BIRTHDAY <u>17</u> (Years)		
(18) BIRTHPLACE <u>Columbia</u>		(19) OCCUPATION <u>Teacher</u>		
(20) Number of children born to mother, including present birth <u>1</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) [Signature]
(24) State whether Physician or Midwife
(25) Address of Physician or Midwife
1224 Columbia

Given name added from a supplemental report

(26) Witness
(Signature of Witness necessary only when question is raised)

(27) Filed 6-29 1922 (28) 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.

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