

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.

MOCCAW OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of allendale
 Township of 11
 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

40675

Registration District No. 4600 Registered No. 133
 (For use of Local Registrar.)
 (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 Rebecca Rountree If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL <u>girl</u>	(4) Twin or Triplet? To be answered only in event of Twins or Triplets	(5) Number in order of birth	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH... <u>Dec 13 1922</u> (Name of Month) (Day) (Year)
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FATHER

(8) FULL NAME Robert Rountree

(9) PRESENT POSTOFFICE OF FATHER allendale SC

(10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 22
(Years)

(12) BIRTHPLACE SC

(13) OCCUPATION Farm Laborer

(20) Number of children born to mother, including present birth 1

MOTHER

(14) NAME BEFORE MARRIAGE adelina Pilyard

(15) PRESENT POSTOFFICE OF MOTHER allendale SC

(16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 21
(Years)

(18) BIRTHPLACE SC

(19) OCCUPATION Farm Laborer

(21) Number of children of this mother new living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 3 a. M. on the date above stated.
(Born alive or stillborn) (Hour, A. M. or P. M.)

(23) (Signature) Jerganna Leady
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife allendale SC

Given name added from a supplemental report

(26) Witness F. H. Boyd
(Signature of Witness necessary only when question 23 is signed by mark)(27) Filed Dec 23 1922 (28) F. H. Boyd MD 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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