

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.

MECAW OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Aiken  
Township of McClellan  
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  
**28533**

Registration District No. 208 Registered No. 14  
(For use of Local Registrar)

(2) Full Name of Child

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

(3) BOY OR GIRL? girl (4) Twin or Triplet? 1 (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Sept. 17, 22  
To be answered only in case of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.  
(8) FULL NAME Eddie Cook  
(9) PRESENT POSTOFFICE OF FATHER Earle, S.C.  
(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 40  
(12) BIRTHPLACE Aiken Co  
(13) OCCUPATION Farmer  
(20) Number of children born to mother, including present birth 9

MOTHER.  
(14) NAME BEFORE MARRIAGE Carrie Goldman  
(15) PRESENT POSTOFFICE OF MOTHER Earle S.C.  
(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 41  
(18) BIRTHPLACE Aiken Co  
(19) OCCUPATION Housewife  
(21) Number of children of this mother now living, including present birth 8

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Alive at 8 P. M.,  
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Julian Post

(24) State whether Physician or Midwife Midwife

(25) Address of Physician or Midwife Earle, 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 10/2 19 23 (28) J. C. Jones  
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.