

(1) PLACE OF BIRTH

County of

Richland

Township of

or
Inc. Town of

City of

(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

16481

Registration District No.

38

Registered No.

1404

(For use of Local Registrar)

(2) Full Name of Child. Nellie Mayo

If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL?

girl

(4) Twin or Triplet?

To be answered only in event of twins or triplets

(5) Number in order of birth

(6) Are Parents Married?

(7) DATE OF BIRTH

May 18 1922

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Johnnie Mayo

(9) PRESENT POSTOFFICE OF FATHER

Columbia, S.C.

(10) COLOR OR RACE

colored

(11) AGE AT LAST BIRTHDAY

30

(Years)

(12) BIRTHPLACE

Columbia, S.C.

(13) OCCUPATION

Railroad

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

5

MOTHER.

(14) NAME BEFORE MARRIAGE

Nettie Bell Roseboro

(15) PRESENT POSTOFFICE OF MOTHER

Columbia, S.C.

(16) COLOR OR RACE

colored

(17) AGE AT LAST BIRTHDAY

28

(Years)

(18) BIRTHPLACE

Fairfield, S.C.

(19) OCCUPATION

House wife

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

4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 5 P.M. on the date above stated (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

J. M. Lee

(24) State whether Physician or Midwife

Midwife

(25) Address of Physician or Midwife

2109 Elmwood Ave

Given name added from a supplemental report

191

Registrar

(26) Witness

Jessie Brown

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

(27) Filed

6-12-1922

(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.

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.