

MARGIN RESERVED FOR BINDING.
WHITE PLAIN: WRITING IN 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.

MOBILE OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Cherokee
Township of Morgan
or
Inc. Town of.....
or
City of.....

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

Registration District No. 1004

File No.—For State Registrar Only
694

Registered No. 2
(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 B. Uglisky

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

(3) BOY OR GIRL Boy

(4) Twin or Triplet?

(5) Number in order of birth
To be answered only in event of Twins or Triplets

(6) Are Parents Married? Yes

(7) DATE OF BIRTH Jan 26 22
(Name of Month) (Day) (Year)

FATHER
(8) FULL NAME B. Uglisky

(9) PRESENT POSTOFFICE OF FATHER Gaffney, S. C.

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 24
(Years)

(12) BIRTHPLACE S. C.

(13) OCCUPATION Farmer

(20) Number of children born to mother, including present birth 3

MOTHER
(14) NAME BEFORE MARRIAGE Rosa, L. Linder

(15) PRESENT POSTOFFICE OF MOTHER

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

(18) BIRTHPLACE S. C.

(19) OCCUPATION Domestic

(21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 6 A. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Narcis Bolla

(24) State whether Physician or Midwife Physician (Physician or Midwife)

Given name added from a supplemental report

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

..... 19.....
Registrar

(27) Filed Jan 31 22 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.