

# CERTIFICATE OF BIRTH

PLACE OF BIRTH

County of Richland

Township of \_\_\_\_\_

or

Inc. Town of \_\_\_\_\_

City of Columbia

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

Registration District No. 36-a

FILE No.—For State Registrar Only

22325-a

Registered No. \_\_\_\_\_

(For use of Local Registrar)

St. \_\_\_\_\_ Ward \_\_\_\_\_

(If birth occurs in a hospital or other institution, give name of same instead of street and number)

FULL NAME OF CHILD Margaret Emma Craig

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

BOY OR GIRL Girl

4. Twin or Triplet?

5. Number in order of birth

6. Are Parents Married? Yes

DATE OF BIRTH

July 19 1923  
(Name of Month) (Day) (Year)

To be answered only in event of Twins or Triplets

### FATHER

FULL NAME Theodore M. Craig

PRESENT POSTOFFICE OF FATHER New Brickland N.C.

COLOR OR RACE White

11. AGE AT LAST BIRTHDAY 28

(Years)

BIRTHPLACE Sumter S.C.

OCCUPATION U.S. employee

Number of children born to mother, including present birth 1

### MOTHER

14. NAME BEFORE MARRIAGE Louise Craft

15. PRESENT POSTOFFICE OF MOTHER New Brickland N.C.

16. COLOR OR RACE W

17. AGE AT LAST BIRTHDAY 19

(Years)

18. BIRTHPLACE S.C.

19. OCCUPATION Nurse

21. Number of children of this mother now living, including present birth 1

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was Born alive at 11:30 M., on the date above stated. (Hour A.M. or P.M.)

23. Signature Chas. B. B. B.

24. State whether Physician or Midwife

25. Address of Physician or Midwife Columbia S.C.

Given name added from a supplemental report

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26. Witness

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

27. Filed Aug 10 1923

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.

Registrar