

WHICH PLACES, WITH THE FORMS, IS THIS IS A PERMANENT RECORD.  
 No. 11—IN CASE OF TWINS OR TRIPLETS USE A SEPARATE BLANKS FOR EACH CHILD, AND MARK THE FIRST-BORN, NO. 1, THE OTHER, NO. 2, ETC., IN QUESTION 5.

City of Columbia

(1) PLACE OF BIRTH  
 County of Richmond  
 Township of .....  
 or  
 Inc. Town of .....  
 or  
 City of Columbia (No. 8 W. Water St. 1 Ward)  
 (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

47206

38a  
 Registered No. 1048  
 (For use of Local Registrar)

2) Full Name of Child. E. Wood Taylor, Rose

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

(6) BOY OR GIRL?	(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parents Married?	(7) DATE OF BIRTH
	To be answered only in case of Twins or Triplets			(Name of Month) (Day) (Year)
FATHER			MOTHER	
(8) FULL NAME <u>E. Wood Taylor</u>			(14) NAME BEFORE MARRIAGE <u>Bertha Rose</u>	
(9) PRESENT POSTOFFICE OF FATHER <u>Columbia</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Columbia</u>	
(10) COLOR OR RACE <u>Colored</u>	(11) AGE AT LAST BIRTHDAY <u>17</u> (Years)	(16) COLOR OR RACE <u>Colored</u>		
(12) BIRTHPLACE <u>Hayfield, N.C.</u>		(17) AGE AT LAST BIRTHDAY <u>17</u> (Years)		
(13) OCCUPATION <u>Lab. Laborer</u>			(18) BIRTHPLACE <u>James, E. C. C. C.</u>	
(20) Number of children born to mother, including present birth <u>1</u>			(19) OCCUPATION <u>Lab. Laborer</u>	
(21) Number of children of this mother now living, including present birth <u>1</u>				

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born at 8:30 P.M. on the date above stated. (Born alive or stillborn) (Hour and P. M.)

(23) Signature E. Wood Taylor

(24) State of South Carolina Physician or Midwife (25) Address of Physician or Midwife

Midwife 1376 B. L. L. L.

Given report added from a supplemental report

(26) Witness E. Wood Taylor  
(Signature of witness necessary only when question 22 is answered by mark)(27) Filed 1/4 1906

(28)

When there was no attending physician or midwife, then the father, householder, etc., should make this report. 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.

Should be reported as such once it is born and should not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.