

MARGIN RESERVED FOR BINDING.

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.

RECAP OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Jasper
Township of Robert
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

43044

Registration District No. 2602 Registered No. 608
(For use of Local Registrar)

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

(2) Full Name of Child David Upchurch If child is not yet named, make supplemental report as directed

(3) SEX Boy (4) Twin or Triplets Twins (5) Number in order of birth 2 (6) Are Parents Married Yes (7) DATE OF BIRTH Dec 1 22
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME David Upchurch

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

(10) COLOR OR RACE Col. (11) AGE AT LAST BIRTHDAY..... (Years)

(12) BIRTHPLACE Jasper Co. S.C.

(13) OCCUPATION Farmer

(20) Number of children born to mother, including present birth 12

MOTHER.

(14) NAME BEFORE MARRIAGE Catherine Ferrell

(15) PRESENT POSTOFFICE OF MOTHER Leeman, S.C.

(16) COLOR OR RACE Col. (17) AGE AT LAST BIRTHDAY..... (Years)

(18) BIRTHPLACE Jasper Co. S.C.

(19) OCCUPATION Housewife

(21) Number of children of this mother now living, including present birth 12

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) W. C. Dandor (24) State whether Physician or Midwife Midwife Address of Physician or Midwife Pineland, S.C.

Given name added from a supplemental report

(26) Witness W. C. Dandor (Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed 12/20/22 (28) W. C. Dandor 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.

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