

FORM NO. 2. MARGIN RESERVED FOR BINDING.
 WHERE PLAINLY, WITH UNFADING INK—THIS IS A SEPARATE BLANK FOR EACH CHILD, AND MARK THE
 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.

(1) PLACE OF BIRTH
 County of Richland
 Township of

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

File No.—For State Registrar Only
23618

Inc. Town of or Registration District No. 38 Registered No. 13713
 City of Columbia (No. 1316 Berkeley Ave) (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. Emma Ella Queen { If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Girl (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? Yes (7) DATE OF BIRTH June 27 19122
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Charles J. Queen
 (9) PRESENT POSTOFFICE OF FATHER Columbia
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 41 (Years)
 (12) BIRTHPLACE A. C.
 (13) OCCUPATION operator in Card Room in Cotton Mill
 (14) Number of children born to mother, including present birth 2

MOTHER.

(14) NAME BEFORE MARRIAGE Etta L. England
 (15) PRESENT POSTOFFICE OF MOTHER Columbia
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 29 (Years)
 (18) BIRTHPLACE A. C.
 (19) OCCUPATION House wife
 (20) Number of children of this mother now living, including present birth 2

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. (Born alive or stillborn.) (Hour A. M. or P. M.)

(23) (Signature) (24) State whether Physician or Midwife (25) Address of Physician or Midwife Columbia

Given name added from a supplemental report

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

(27) Filed 7-20 19122 (28) Edw. J. King 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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