

12/31/43 W 50¢ paid.

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.

Form No. 3

22 049348

1. PLACE OF BIRTH

County of Richland

Township of.....

or

Inc. Town of.....

or

City of.....

(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

01215

Registration District No. 3800

Registered No.

(For use of Local Registrar)

(No. Dutch Fork St., Ward)2. FULL NAME OF CHILD Geneva Nelums{ If child is not yet named, make
supplemental report as directed.3. BOY OR
GIRL Girl4. Twin or
Triplet?5. Number in order
of birth6. Are
Parents
Married? yes

7. DATE OF BIRTH

Oct. 17, 1922
(Name of Month) (Day) (Year)

To be answered only in event of Twins or Triplets

FATHER

8. FULL
NAME John Henry Nelums9. ADDRESS AT
CHILD'S BIRTH Dutch Fork10. COLOR
OR
RACE C11. AGE AT CHILD'S
BIRTH 24 (Years)12. BIRTHPLACE SC13. OCCUPATION Tal20. Number of children born to
mother, including present birth. 1

MOTHER

14. NAME BEFORE
MARRIAGE Hattie Hand15. ADDRESS AT
CHILD'S BIRTH Dutch Fork16. COLOR
OR
RACE C17. AGE AT CHILD'S
BIRTH 21 (Years)18. BIRTHPLACE SC19. OCCUPATION Remi21. Number of children of this mother
now living, including present birth. 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

22. I hereby certify that I attended the birth of this child, who was Born alive at 5 P. M.
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)23. Signature B. E. Everett

24. State whether Physician or Midwife

25. Address of Physician or Midwife Columbia

Given name added from a supplemental report

....., 194.....

Registrar

26. Witness.....

(Signature of Witness necessary only
when question 23 is signed by mark)27. Filed Jan. 15, 19 4428. L. A. Riser, M.D.

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. keh