

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.

MOGAW OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Sumner  
Township of 1964  
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  
**18944**

Registration District No. 2310 Registered No. ....  
(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 Jimmie Hill If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth 2 (6) Are Parents Married? Yes (7) DATE OF BIRTH June 25 1922  
(Same of Month) (Day) (Year)

FATHER.

(8) FULL NAME Jimmie Hill  
(9) PRESENT POSTOFFICE OF FATHER Dyers  
(10) COLOR OR RACE Blk (11) AGE AT LAST BIRTHDAY 25 (Years)  
(12) BIRTHPLACE S. C.  
(13) OCCUPATION Farmer  
(20) Number of children born to mother, including present birth 7

MOTHER.

(14) NAME BEFORE MARRIAGE Lucile Ruder  
(15) PRESENT POSTOFFICE OF MOTHER Dyers  
(16) COLOR OR RACE Blk (17) AGE AT LAST BIRTHDAY 23 (Years)  
(18) BIRTHPLACE S. C.  
(19) OCCUPATION Domestic  
(21) 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 alive at 9.9 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) T. L. Hill  
(24) State whether Physician or Midwife (25) Address of Physician or Midwife 1964 S. C.

Given name added from a supplemental report

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

(27) Filed June 25 1922 (28) T. L. Hill 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.