

(1) PLACE OF BIRTH

County of Richland

Township of

Inc. Town of

City of Columbia

(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

87143

Registration District No. 28-4Registered No. 325

(For use of Local Registrar)

(2) Full Name of Child

Angela

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

(3) BOY OR GIRL? Girl(4) Twin or Triplet? 1

(Take answer only in case of twins or triplets)

(5) Number in order of birth 4(6) Are Parents Married? Yes(7) DATE OF BIRTH Oct 11 1916

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Wesley Pegler

(9) PRESENT POSTOFFICE OF FATHER

1926 Main

(10) COLOR OR RACE

white

(11) AGE AT LAST BIRTHDAY

27 (Years)

(12) BIRTHPLACE

M.C

(13) OCCUPATION

Baggage Master

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

4

MOTHER.

(14) NAME BEFORE MARRIAGE

Addie Gaskew

(15) PRESENT POSTOFFICE OF MOTHER

1926 Main

(16) COLOR OR RACE

white

(17) AGE AT LAST BIRTHDAY

27 (Years)

(18) BIRTHPLACE

M.C

(19) OCCUPATION

Housewife

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

4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

191...

Registrar

(26) Witness

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

(27) Filed

Nov 1 1916

(28)

[Signature]

Local Registrar

*When there was no attending physician or midwife, then the father, householder, etc., should make this return. 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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THIS IS A PERMANENT RECORD. 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.

McCall, of Columbia.