

MAKER RESERVED FOR BINDING.

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.  
 IN CASE OF TWINS OR TRIPLETS USE A SEPARATE BLANK FOR EACH CHILD, AND MAKE THE FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

MODEL OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Aiken  
 Township of North Aiken  
 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

2877

Registration District No. 207

Registered No. 9  
 (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 Fred Mose

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

(3) BOY OR GIRL Boy

(4) Twin or Triplet Single

(5) Number in order of birth 4

(6) Are Parents Married? Yes

(7) DATE OF BIRTH

Feb 16, 1922  
 (Name of Month) (Day) (Year)

(8) FULL NAME

Edie Mose

FATHER.

(9) PRESENT POSTOFFICE OF FATHER

Aiken S.C.

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY 26  
 (Years)

(12) BIRTHPLACE

Aiken S.C.

(13) OCCUPATION

Public Work

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

4

MOTHER.

(14) NAME BEFORE MARRIAGE

Rosemary Bunt

(15) PRESENT POSTOFFICE OF MOTHER

Aiken S.C.

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY 23  
 (Years)

(18) BIRTHPLACE

Aiken Co S.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 on the date above stated.

(Born alive or stillborn)

at 2 P. M.  
 (Hour A. M. or P. M.)

(23) (Signature) Clara Page

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

(26) Witness

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

(27) Filed

Feb 20, 1922 (28) W. H. Cook  
 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.