

(1) PLACE OF BIRTH

County of *Columbia*
 Township of *Central*
 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

2256

Registration District No. *3200* Registered No. *5*
 (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 *Matthew May Humphreys* If child is not yet named, make supplemental report as directed

1. BOY OR GIRL *Boy* 2. Twin or Triplet? *No* 3. Number by order of birth *1* 4. Are Parents Married? *Yes* 5. DATE OF BIRTH *Jan 4, 1922*
 To be answered only in event of Twins or Triplets (Sign of Month) (Day) (Year)

FATHER.

6. FULL NAME *Jack Humphreys*
 7. PRESENT POSTOFFICE OF FATHER *Central S.C.*
 8. COLOR OR RACE *White* (11) AGE AT LAST BIRTHDAY *36*
 9. BIRTHPLACE *S.C.*
 10. OCCUPATION *Farmer*
 12. Number of children born to mother, including present birth *5*

MOTHER.

14. NAME BEFORE MARRIAGE *Mary Golden*
 15. PRESENT POSTOFFICE OF MOTHER *Central S.C.*
 16. COLOR OR RACE *White* (17) AGE AT LAST BIRTHDAY *28*
 18. BIRTHPLACE *S.C.*
 19. OCCUPATION *House keeper*
 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 *Alive* on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) *Dr. J. H. P.*
 (24) State whether Physician or Midwife. (25) Address of Physician or Midwife *Central S.C.*

Given name added from a supplemental report

(26) Witness

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

(19) Registrar

(27) Filed

(28)

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. If none, notice reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.

WITH PLACENT, WITH UNBORN CHILD, WHEN IN A PROMINENT POSITION, IN A CASE OF TAKING OR THREATENING TO TAKE, IN A CASE OF ABORTION, IN A CASE OF STILLBORN, IN A CASE OF FIRST-BORN, No. 1. THE OTHER No. 2. etc. In question 5

MEANS OF COLUMBIA, COLUMBIA, S. C.