

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.

MOGAW OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Edgefield
Township of Staten
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

42214

Registration District No. 1808 Registered No. 40
(For use of Local Registrar)

(No. St.; Ward)

(2) Full Name of Child Francis Nicholson (If child is not yet named, make supplemental report as directed)

(3) ~~BOY OR~~ GIRL? Girl (4) Twin or Triplet? No (5) Number in order of birth 3 (6) Are Parents Married? yes (7) DATE OF BIRTH Dec 21 1922
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Isiah Nicholson
(9) PRESENT POSTOFFICE OF FATHER Edgefield
(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 31 (Years)
(12) BIRTHPLACE Edgefield
(13) OCCUPATION Farming
(20) Number of children born to mother, including present birth 3

MOTHER.

(14) NAME BEFORE MARRIAGE Ella Chatham
(15) PRESENT POSTOFFICE OF MOTHER Edgefield
(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 30 (Years)
(18) BIRTHPLACE Edgefield
(19) OCCUPATION House hand
(21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born at 12 M., on the date above stated. (Born live or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Francis Bell
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Edgefield S.C.

Given name added from a supplemental report

(26) Witness Mrs. M. F. Nicholson
(Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed 1/8/23 1923 (28) Oct. D. F. Smith 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.