

**CERTIFICATE OF BIRTH**  
**STATE OF SOUTH CAROLINA**  
 Bureau of Vital Statistics  
 State Board of Health

File No. — For State Registrar Only  
**91476**

(1) PLACE OF BIRTH  
 County of Richland

Township of .....

or  
 Inc. Town of .....

City of Columbia  
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

Registration District No. 2224 Registered No. 373  
 (For use of Local Registrar)

(2) Full Name of Child Mr. Edmund Pinell. Somers

(3) BOY OR GIRL?  
Boy

(4) Twin or Triplet? No  
To be answered only in case of Twin or Triplet

(5) Number in order of birth 4

(6) Are Parents Married? Yes

(7) DATE OF BIRTH Aug. 16, 1914  
(Name of Month) (Day) (Year)

FATHER.  
 (8) FULL NAME Joe Patrick Somers

(9) PRESENT POSTOFFICE OF FATHER Columbia S.C.

(10) COLOR OR RACE White

(11) BIRTHPLACE S.C.

(12) OCCUPATION Printer

(13) Number of children born to mother, including present birth 4

(14) NAME BEFORE MARRIAGE Agnes Edell Hunt

(15) PRESENT POSTOFFICE OF MOTHER Columbia S.C.

(16) COLOR OR RACE White

(17) BIRTHPLACE S.C.

(18) OCCUPATION Housewife

(19) Number of children of this mother and father, including present birth 14

**CERTIFICATE OF ATTENDING PHYSICIAN (To Midwives)**

(20) I hereby certify that I attended the birth of this child, who was born white at Columbia on the date above stated.

(21) (Signature) R. S. Somers  
 (22) State whether Physician or Midwife Physician

Other name added from a subsequent report

(23) Witness Edmund Pinell Somers  
Agnes Edell Hunt

When there was no attending physician or midwife, the birth was attended by the mother or by a person who was not a physician or midwife. In such cases, the birth should be reported to the State Board of Health as soon as possible after the birth.