

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.

MOCCAW OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Wilkesburg
Township of Johnson
OF
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

75110

Registration District No. 1304 Registered No. 88
(For use of Local Registrar)
(No. St.; Ward)
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Mildred Estelle Wilson { If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Girl (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? yes (7) DATE OF BIRTH Aug 4, 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Jacob Wilson
(9) PRESENT POSTOFFICE OF FATHER Rome S.C.
(10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY 26 (Years)
(12) BIRTHPLACE Rome S.C.
(13) OCCUPATION Laborer
(20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Mattie May
(15) PRESENT POSTOFFICE OF MOTHER Rome S.C.
(16) COLOR OR RACE Mulato (17) AGE AT LAST BIRTHDAY (Years)
(18) BIRTHPLACE Oaks S.C.
(19) OCCUPATION Labour
(21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) Jane J. Johnson
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Rome S.C.

Given name added from a supplemental report

(26) Witness W. Kay Bell
(Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed Aug 11 1916 (28) R. H. Bell 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.