

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.
DEPARTMENT OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Orangeburg
Township of Willa
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.)

(2) Full Name of Child

Phillipina Pew

File No.—For State Registrar Only
16290

Registration District No. 3617

Registered No. 5-9
(For use of Local Registrar)

(3) BOY OR GIRL girl

(4) Twin or Triplet?

(5) Number in order of birth

(6) Are Parents Married? yes

(7) DATE OF BIRTH May 5 19 22
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Phillip Pew

(9) PRESENT POSTOFFICE OF FATHER

Marion S C

(10) COLOR OR RACE

Negro

(11) AGE AT LAST BIRTHDAY 30
(Years)

(12) BIRTHPLACE

Sc

(13) OCCUPATION

Farmer

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

3

MOTHER.

(14) NAME BEFORE MARRIAGE

Elizabeth Ross

(15) PRESENT POSTOFFICE OF MOTHER

Marion S C

(16) COLOR OR RACE

Negro

(17) AGE AT LAST BIRTHDAY 25
(Years)

(18) BIRTHPLACE

Sc

(19) OCCUPATION

House wife

(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
on the date above stated.

(23) (Signature)

(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 5714 19 22

(28) J. H. Price
Loc. 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.