

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.

RECAP OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Pickens
Township of Casley
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

31818

Registration District No. 3702

Registered No. 64
(For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)
(No. St. Ward)

(2) Full Name of Child

If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Boy
(4) Twin or Triplet? No
To be answered only in case of Twins or Triplets
(5) Number in order of birth
(6) Are Parents Married yes
(7) DATE OF BIRTH Sept 23 1922
(Name of Month) (Day) (Year)

FATHER.

MOTHER.

(8) FULL NAME W. Merritt Soper

(10) NAME BEFORE MARRIAGE Olga Spearman

(9) PRESENT POSTOFFICE OF FATHER Casley P. # 2

(12) PRESENT POSTOFFICE OF MOTHER Casley P. # 2

(10) COLOR OR RACE White

(14) COLOR OR RACE White

(11) AGE AT LAST BIRTHDAY 50
(Years)

(16) AGE AT LAST BIRTHDAY 34
(Years)

(12) BIRTHPLACE S.C.

(18) BIRTHPLACE S.C.

(13) OCCUPATION Farmer

(15) OCCUPATION Domestic

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

(21) Number of children of this mother now living, including present birth 13

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Alive at 7 P. M.
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. D. Soper

(24) State whether Physician or Midwife Physician

(25) Address of Physician or Midwife Casley

Given name added from a supplemental report

(26) Witness

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

(27) Filed Oct. 2 1922 (28) E. H. Wyatt
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.

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