

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.

RECAP OF COLUMBIA, COLUMBIA, S. C.

## (1) PLACE OF BIRTH

County of Aiken  
Township of Milbrook  
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

Ethel Borum

File No.—For State Registrar Only

40600

Registration District No. 20Registered No. 57  
(For use of Local Registrar)

St.; ..... Ward)

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. November 22  
(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Mathew Borum  
(9) PRESENT POSTOFFICE OF FATHER Aiken S.C. R.F.D. #4  
(10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 26  
(Years)  
(12) BIRTHPLACE Edgefield Co S.C.  
(13) OCCUPATION Farmer

## MOTHER.

(14) NAME BEFORE MARRIAGE Willie May Grier  
(15) PRESENT POSTOFFICE OF MOTHER Aiken S.C. R.F.D. #4  
(16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 29  
(Years)  
(18) BIRTHPLACE Aiken Co S.C.  
(19) OCCUPATION House wife  
(20) Number of children born to mother, including present birth Two  
(21) Number of children of this mother now living, including present birth Two

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Born alive at 11:45 A.M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Chas. M. D.(24) State whether Physician or Midwife Physician(25) Address of Physician or Midwife Aiken, S.C.

Given name added from a supplemental report

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

(27) Filed 22010 1922 (28) F. A. Cook 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. A report is desired of stillbirths before the fifth month of pregnancy.

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