

RECORDS OF COLUMBIA, COLUMBIA, S. C.

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.

(1) PLACE OF BIRTH

County of Abbeville  
 Township of Maguolia  
 OF  
 Inc. Town of.....  
 OF  
 City of.....

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA  
 Bureau of Vital Statistics  
 State Board of Health

File No. — For State Registrar Only  
**5628**

Registration District No. 109 Registered No. 30  
 (For use of Local Registrar)

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

(2) Full Name of Child Fred Calhoun Reid If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH March 21, 1923  
 (Name of Month) (Day) (Year)

FATHER.  
 (8) FULL NAME Daniel Reid  
 (9) PRESENT POSTOFFICE OF FATHER Hester S. C.  
 (10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 38  
 (Year)  
 (12) BIRTHPLACE Abbeville Co.  
 (13) OCCUPATION Farmer  
 (20) Number of children born to mother, including present birth 10

MOTHER.  
 (14) NAME BEFORE MARRIAGE Rebecca Calhoun  
 (15) PRESENT POSTOFFICE OF MOTHER Hester S. C.  
 (16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 36  
 (Year)  
 (18) BIRTHPLACE Abbeville Co.  
 (19) OCCUPATION Domestic  
 (21) Number of children of this mother now living, including present birth 9

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature) Lisa Haskell  
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Calhoun Falls

(Given name added from a supplemental report)

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)  
 (27) Filed March 28, 1923 (28) W. H. Vance 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.