CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only
91537

(1) PLACE OF BIRTH
County of Richland
Township of .....
or
Inc. Town of .....
or
City of Columbia S.C.

Registration District No. 38a
Registered No. 1608
(For use of Local Registrar)

(No. 2015 Oak St.; 7 Ward)
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Frank Charles Bolden
If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? boy
(4) Twin or Triplet? To be answered only in event of Twins or Triplets
(5) Number in order of birth
(6) Are Parents Married? married
(7) DATE OF BIRTH Dec 17, 1916 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Mose Bolden
(9) PRESENT POSTOFFICE OF FATHER Columbia S.C.
(10) COLOR OR RACE Colored
(11) AGE AT LAST BIRTHDAY 28 (Years)
(12) BIRTHPLACE Columbia S.C.
(13) OCCUPATION Porter

MOTHER.

(14) NAME BEFORE MARRIAGE Malinda Grier
(15) PRESENT POSTOFFICE OF MOTHER Columbia S.C.
(16) COLOR OR RACE Colored
(17) AGE AT LAST BIRTHDAY 26 (Years)
(18) BIRTHPLACE Columbia S.C.
(19) OCCUPATION laundry work

(20) Number of children born to mother, including present birth 3
(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 alive (Born alive or stillborn) Dec. 17, 1916 at 11 P. M. (Hour A. M. or P. M.) on the date above stated.

(23) (Signature) Susan V Smith
(24) State whether Physician or Midwife midwife
(25) Address of Physician or Midwife 1920 Harden St

Given name added from a supplemental report .....
..... 19 ....
..... Registrar

(26) Witness Annie Brown (Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed 1-2 1917
(28) [illegible] 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.

McCAW PRINTING CO. COLUMBIA, S. C.
WHITE 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.