

MARSHALL COUNTY, MISSISSIPPI, RECORDING.  
WHITE PLAINLY. WITH UNFADING INK—THIS IS A PERMANENT RECORD.  
In case of TWINS OR TRIPLETS use a SEPARATE HICANIC FOR EACH CHILD, and mark the  
FIRST-BORN. No. 1. THE OTHER, No. 2, etc., in question 5.  
MEGAN OF COLUMBIA, COLUMBIA, S. C.

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

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

File No.—For State Registrar Only  
**25280**

Registration District No. 911 Registered No. 18  
(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 Noah Aiken { If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Boy (4) Twin or Triplet? ..... (5) Number in order of birth ..... (6) Are Parents Married? Yes (7) DATE OF BIRTH Aug 5th 1922  
(Name of Month) (Day) (Year)

FATHER.  
(8) FULL NAME Bessie Aiken  
(9) PRESENT POSTOFFICE OF FATHER Midland Park  
(10) COLOR OR RACE colored (11) AGE AT LAST BIRTHDAY 35  
(Year) (12) BIRTHPLACE Woodstock S.C.  
(13) OCCUPATION Wood cutter  
(20) Number of children born to mother, including present birth 7

MOTHER.  
(14) NAME BEFORE MARRIAGE Alice Jones  
(15) PRESENT POSTOFFICE OF MOTHER Midland Park  
(16) COLOR OR RACE colored (17) AGE AT LAST BIRTHDAY 33  
(Year) (18) BIRTHPLACE Woodstock S.C.  
(19) OCCUPATION Housewife  
(21) Number of children of this mother now living, including present birth 7

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*  
(22) I hereby certify that I attended the birth of this child, who was Alive at 12:45 P.M.  
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Sarah X. Parker  
(24) State whether Physician or Midwife 11 (25) Address of Physician or Midwife Midland Park

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

(26) Witness S. T. Parker  
(Signature of Witness necessary only when question 23 is signed by mark)  
(27) Filed Aug 10th 1922 (28) Wm. J. H. H.  
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.