

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. THIS OTHER, No. 2, etc., in question 5
 RECORD OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Columbia
 Township of St. Johns
 or
 Inc. Town of
 or
 City of

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

Registration District No. 802

File No.—For State Registrar Only
41164

Registered No. 146
 (For use of Local Registrar)

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

(2) Full Name of Child Prusilla Jameson { If child is not yet named, make supplemental report as directed

3. Girl 4. Twin or Triplet? one 5. Number in order of birth 1 6. Are Parents Married? yes 7. DATE OF BIRTH Dec 28 1922
 (Name of Month) (Day) (Year)

FATHER.

8. FULL NAME Booker Jameson
 9. PRESENT POSTOFFICE OF FATHER Cameron SC
 10. COLOR OR RACE Colard 11. AGE AT LAST BIRTHDAY 29 (Years)
 12. BIRTHPLACE Orangeburg
 13. OCCUPATION Farmer
 20. Number of children born to mother, including present birth one

MOTHER.

14. NAME BEFORE MARRIAGE Prusilla Skiers
 15. PRESENT POSTOFFICE OF MOTHER Cameron SC
 16. COLOR OR RACE Colard 17. AGE AT LAST BIRTHDAY 19 (Years)
 18. BIRTHPLACE Orangeburg
 19. OCCUPATION Domestic
 21. Number of children of this mother now living, including present birth one

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 4 A. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Booker Jameson (25) Address of Physician or Midwife Cameron SC
 (24) State whether Physician or Midwife midwife

Given name added from a supplemental report
 (26) Witness Mrs. Smith (Signature of Witness necessary only when question 23 is signed by mark)
 (27) Filed Dec 28 1922 (28) W. H. Keller 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.