

USE SEPARATE BLANK FOR EACH CHILD, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

(1) PLACE OF BIRTH		CERTIFICATE OF BIRTH		File No. — For State Registrar Only	
County of <u>Richland</u>		STATE OF SOUTH CAROLINA		16455	
Township of		Bureau of Vital Statistics			
Inc. Town of		State Board of Health			
City of <u>Columbia</u>		Registration District No. <u>38</u>		Registered No. <u>1368</u>	
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)		(No. <u>2501 Laurel</u>)		St.; Ward)	
(2) Full Name of Child <u>Margorie Quattabam</u>		If child is not yet named, make supplemental report as directed			
(3) BOY OR GIRL <u>Girl</u>	(4) Twin or Triplet? <u>X</u>	(5) Number in order of birth <u>X</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>5</u> <u>8</u> <u>22</u>	
To be answered only in event of Twin or Triplet					
FATHER			MOTHER		
(8) FULL NAME <u>R. Quattabam</u>			(14) NAME BEFORE MARRIAGE <u>Eva Edwards</u>		
(9) PRESENT POSTOFFICE OF FATHER <u>Columbia S.C.</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Columbia S.C.</u>		
(10) COLOR OR RACE <u>White</u>			(16) COLOR OR RACE <u>White</u>		
(11) AGE AT LAST BIRTHDAY <u>44</u> (Years)			(17) AGE AT LAST BIRTHDAY <u>33</u> (Years)		
(12) BIRTHPLACE <u>Saluda, S.C.</u>			(18) BIRTHPLACE <u>Saluda S.C.</u>		
(13) OCCUPATION <u>Engineer</u>			(19) OCCUPATION <u>Housewife</u>		
(20) Number of children born to mother, including present birth <u>7</u>			(21) Number of children of this mother now living, including present birth <u>6</u>		
CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE					
(22) I hereby certify that I attended the birth of this child, who was <u>alive</u> at <u>7:30 P.M.</u> on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)					
(23) (Signature) <u>Edythe Weebourn</u>					
(24) State whether Physician or Midwife					
(25) Address of Physician or Midwife <u>Physician Columbia S.C.</u>					
Given name added from a supplemental report			(26) Witness		
.....			(Signature of Witness necessary only when question 23 is signed by mark)		
.....			(27) Filed <u>5/82</u> 19 <u>22</u> (28) Local Registrar		
19					
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.

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