

THIS IS A PERMANENT RECORD. 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.

MEANS OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Aiken
Township of Langley
or
Inc. Town of.....
or
City of Langley St (No. St.; Ward)
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

17371

Registration District No. 2119 Registered No. 49
(For use of Local Registrar)

(2) Full Name of Child Vethie Anderson (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL? girl (4) Twin or Triplet? — (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH June 19 1919
(Name of Month) (Day) (Year)

FATHER.

MOTHER.

(3) FULL NAME Ben Anderson

(14) NAME BEFORE MARRIAGE Kuby Corley

(9) PRESENT POSTOFFICE OF FATHER Langley St

(15) PRESENT POSTOFFICE OF MOTHER Langley St

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 29 (Years)

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY — (Years)

(12) BIRTHPLACE Richman Co Ga

(18) BIRTHPLACE Aiken Co St

(13) OCCUPATION Cotton Mill Work

(19) OCCUPATION Domestic

(20) Number of children born to mother, including present birth 3

(21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Born alive at 9:30 AM on the date above stated. (Born alive or stillborn) (Hour, M. or P.)

(23) (Signature) J. D. Wright (24) State whether Physician or Midwife (25) Address of Physician or Midwife

Physician Langley St

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)

(27) Files June 19 1919 (28) L. W. Spradley 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.