

(1) PLACE OF BIRTH

County of Richland Co.

Township of

Inc. ^{OR} Town ofCity of Columbia S.C.

(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

19974

Registration District No. 38Registered No. 1475

(For use of Local Registrar)

St. Fourth Ward(2) Full Name of Child. Margaret Powell { If child is not yet named, make supplemental report as directed(3) BOY OR GIRL? girl (4) Twin or Triplet? no (5) Number in order of birth one (6) Are Parents Married? yes (7) DATE OF BIRTH June 10 1997

Take answer only in event of Twins or Triplets

Name of Month (Day) (Year)

FATHER.

MOTHER

(8) FULL NAME Buford Powell(14) NAME BEFORE MARRIAGE mine Butler(9) PRESENT POSTOFFICE OF FATHER 1621 Tobacco St(15) PRESENT POSTOFFICE OF MOTHER 1621 Tobacco St(10) COLOR OR RACE Col (11) AGE AT LAST BIRTHDAY 26 (Years)(16) COLOR OR RACE Col (17) AGE AT LAST BIRTHDAY 29 (Years)(12) BIRTHPLACE Camden S.C.(18) BIRTHPLACE Camden S.C.(13) OCCUPATION day labor(19) OCCUPATION house keep(20) Number of children born to mother, including present birth one(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 8:30 am on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Maggie Jones

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

mid wife 1417 Whaley St

Given name added from a supplemental report

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

(27) Filed 6-29 1997 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.

FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

McCaw, of Columbia.