

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 3.  
 RECORD OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Charleston S.C.  
 Township of Israel Seel  
 or  
 Inc. Town of Israel Seel  
 or  
 City of                     

# CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

10394

Registration District No. 913 Registered No. 24  
 (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 Ributa Middleton

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                      (6) Are Parents Married? Yes (7) DATE OF BIRTH April 1, 1922  
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER  
 (8) FULL NAME Hellie Middleton  
 (9) PRESENT POSTOFFICE OF FATHER Martin Point S.C.  
 (10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY 29 (Year)  
 (12) BIRTHPLACE Israel Seel  
 (13) OCCUPATION Tramman  
 (20) Number of children born to mother, including present birth 4

MOTHER  
 (14) NAME BEFORE MARRIAGE Ben Mitchell  
 (15) PRESENT POSTOFFICE OF MOTHER Martin Point S.C.  
 (16) COLOR OR RACE Black (17) AGE AT LAST BIRTHDAY 37 (Year)  
 (18) BIRTHPLACE Israel Seel  
 (19) OCCUPATION Housewife  
 (21) Number of children of this mother now living, including present birth 4

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature) May Grayson (24) Place whether Physician or Midwife                      (25) Address of Physician or Midwife Martin Point S.C.  
 (26) Witness (Signature of Witness necessary only when question 23 is signed in mark)                       
 (27) Filed May 10, 1922 (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.