

McCaw, of Columbia.
NOTE—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.

(1) PLACE OF BIRTH		COUNTY OF <u>Richland</u>	
Township of		INC. OR TOWN OF	
City of <u>Columbia</u>		Registration District No. <u>38a</u>	
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)		Registered No. <u>1566</u>	
(2) Full Name of Child <u>Mariam Hampton Simmons</u>		If child is not yet named, make supplemental report as directed	
(3) BOY OR GIRL?	(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parents Married?
	To be answered only in case of Twins or Triplets		
(7) DATE OF BIRTH		(8) FATHER	
(Name of Month) (Day) 191—			
		(9) FULL NAME <u>Hampton Simmons</u>	
		(10) PRESENT POSTOFFICE OF FATHER <u>Columbia SC</u>	
		(11) COLOR OR RACE <u>Col</u>	
		(12) AGE AT LAST BIRTHDAY <u>19</u> (Years)	
		(13) BIRTHPLACE <u>Columbia SC</u>	
		(14) OCCUPATION <u>Laborer</u>	
		(15) Number of children born to mother, including present birth <u>1</u>	
		(16) MOTHER	
		(17) NAME BEFORE MARRIAGE <u>Martha Holmes</u>	
		(18) PRESENT POSTOFFICE OF MOTHER <u>Columbia SC</u>	
		(19) COLOR OR RACE <u>Col</u>	
		(20) AGE AT LAST BIRTHDAY <u>17</u> (Years)	
		(21) BIRTHPLACE <u>Johnson, SC</u>	
		(22) OCCUPATION <u>Housewife</u>	
		(23) Number of children of this mother now living, including present birth <u>1</u>	
CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*			
(24) I hereby certify that I attended the birth of this child, who was <u>born alive</u> at <u>11:09</u> M., on the date above stated. (Hour A. M. or P. M.)			
(25) (Signature) <u>[Signature]</u>			
(26) State whether Physician or Midwife <u>Physician</u>			
(27) Address of Physician or Midwife <u>Columbia SC</u>			
(28) Given name added from a supplemental report			
(29) 191—			
(30) Registrar			
(31) Witness (Signature of Witness necessary only when question 23 is signed by mark)			
(32) Filed <u>7-31-1922</u> (29) <u>[Signature]</u> 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.