

THIS IS A VERIFICATION RECORD.  
WHITE PLAIN, WITH UNFADING INK—THIS IS A SEPARATE BLANK FOR EACH CHILD, and mark the  
N. B.—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 6.

(1) PLACE OF BIRTH

County of Richland

Township of .....

or  
Inc. Town of .....

City of Columbia

(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

31903

Registration District No. 258

Registered No. 1688

(For use of Local Registrar)

(No. 501 Green St.; and Ward)

(2) Full Name of Child Lessie Bell Cooper

If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL girl

(4) Twin or Triplet? To be answered only in event of Twins or Triplets

(5) Number in order of birth

(6) Are Parents Married? yes

(7) DATE OF BIRTH Sept 9, 1922  
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Raymond Cooper

(9) PRESENT POSTOFFICE OF FATHER Columbia S.C.

(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 24 (Years)

(12) BIRTHPLACE Columbia S.C.

(13) OCCUPATION Laborer

(20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Pearl Hawkins

(15) PRESENT POSTOFFICE OF MOTHER Columbia S.C.

(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 18 (Years)

(18) BIRTHPLACE Columbia S.C.

(19) OCCUPATION None

(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 Alive at 2:30 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Mrs. A. M. Mower  
(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

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

Edna C. Mower  
Registrar

(27) Filed 9/29/22 (28) 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.

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