

MARGIN RESERVED FOR BINDING. THIS IS A VITAL STATISTICS REPORT, and mark the
WITH PLAINLY, WITH UNFADING INK—THIS IS A VITAL STATISTICS REPORT, and mark the
IN CASE OF TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the
FIRST-BORN, No. 1, this child, No. 2, etc., in question 8.
REG. OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Ashebury S. C.

Township of

or

Inc. Town of

or

City of Ashebury S. C.

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics
State Board of Health

File No. — For State Registrar Only

39454

Registration District No. 34...

Registered No. 174...

(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 David William Campbell child is not yet named, make supplemental report as directed

(3) BOY OR GIRL

Boy

(4) Twin or Triplet?

To be answered only in case of Twin or Triplet

(5) Number in order of birth

3

(6) Are Parents Married?

yes

(7) DATE OF BIRTH

Nov 14 1922
(Name of Month) (Day) (Year)

FATHER

(8) FULL NAME

William Pinkney Campbell

(9) PRESENT POSTOFFICE OF FATHER

Ashebury S. C.

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

28
(Years)

(12) BIRTHPLACE

Ashebury S. C.

(13) OCCUPATION

mill man

MOTHER

(14) NAME BEFORE MARRIAGE

Bessie Lee Fulmer

(15) PRESENT POSTOFFICE OF MOTHER

Ashebury S. C.

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

24
(Years)

(18) BIRTHPLACE

Ashebury S. C.

(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

3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 2:46 P.M. on the date above stated. (Born alive or stillborn) (Hour, M., or P.M.)

(23) (Signature)

(24) State whether Physician or Midwife

Physician

(25) Address of Physician or Midwife

Ashebury S. C.

Given name added from a supplemental report

(26) Witness

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

(27) Filed Nov 29 1922

(28) W. B. Cunningham 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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