

(1) PLACE OF BIRTH

CERTIFICATE OF BIRTH

File No.—For State Registrar Only

County of Kershaw

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

43053

Township of

Registration District No. 27a Registered No. 91
(For use of Local Registrar)

City of Columbia

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)
St. Ward

(2) Full Name of Child John William Newman

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

(3) BOY OR GIRL? Boy

(4) Twin or Triplet?

(5) Number in order of birth 1

(6) Are Parents Married? Yes

(7) DATE OF BIRTH 2-15-22
(Name of Month) (Day) (Year)

FATHER.

MOTHER.

(8) FULL NAME Joe Newman

(14) NAME BEFORE MARRIAGE Rachel E. Gardner

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

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

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 47 (Years)

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 26 (Years)

(12) BIRTHPLACE Kershaw Co.

(18) BIRTHPLACE Kershaw Co.

(13) OCCUPATION Photographer

(19) OCCUPATION Home Keeper

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

(21) Number of children of this mother now living, including present birth Three

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born at 5 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) [Signature]

(24) State whether Physician or Midwife Midwife

(25) Address of Physician or Midwife [Address]

Given name added from a supplemental report [Signature]

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

(27) Filed Jan 9 1923 (28) [Signature] 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.

BIRTH MONTH OF PREGNANCY [Blank]
before the fifth month of pregnancy.

MOHAM OF COLUMBIA, COLUMBIA, S. C.