

MARGIN RESERVED FOR BINDING.

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 5.

MOGAW OF COLUMBIA, COLUMBIA, S. C.

and mark the

(1) PLACE OF BIRTH

County of Calham
Township of Pine Grove
or
Inc. Town of Lou. Star. 5E
or
City of

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

File No.—For State Registrar Only
75928

Registration District No. 803 Registered No. 81
(For use of Local Registrar)
St.; Ward)

(2) Full Name of Child James Heatley

(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Feb 3, 1916
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)
(If child is not yet named, make supplemental report as directed)

FATHER.

(8) FULL NAME James Heatley
(9) PRESENT POSTOFFICE OF FATHER Fort-Math 5E
(10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 33
(12) BIRTHPLACE Fort-Math 5E
(13) OCCUPATION Farmer
(20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Helbin Fort-Heatley
(15) PRESENT POSTOFFICE OF MOTHER Fort-Math 5E
(16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 36
(18) BIRTHPLACE Fort-Math 5E
(19) OCCUPATION wife
(21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) Mary Johnson
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Fort-Math 5E

Given name added from a supplemental report

(26) Witness Mrs. J. D. Stoneman
(Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed Apr 12, 1916 (28) J. D. Stoneman
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.