

MARGIN RESERVED FOR INDEXING.
 WRITE PLAINLY, WITH UNFADING INK.—THIS IS A PERMANENT RECORD.
 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 4.

(1) PLACE OF BIRTH
 County of Richland
 Township of

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

No. 37421—For State Register

Inc. Town of

City of Columbia (No. R.F.D. No. 3 lot 1 R. Ward)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

Registration District No. 38B Registered No. 276
 (For use of Local Registrar)

(2) Full Name of Child Willie Dixon (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL girl **(4) Twin or Triplet** twins **(5) Number in order of birth** two **(6) Are Parents Married** yes **(7) DATE OF BIRTH** Nov. 6th 1923
 To be answered only in case of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.		MOTHER.	
(8) FULL NAME <u>Hart Dixon</u>	(14) NAME BEFORE MARRIAGE <u>Mary Lorick</u>	(9) PRESENT POSTOFFICE OF FATHER <u>Columbia, S. C.</u>	(18) PRESENT POSTOFFICE OF MOTHER <u>Columbia, S. C.</u>
(10) COLOR OR RACE <u>Colored</u> (11) AGE AT LAST BIRTHDAY <u>36</u> (Years)	(16) COLOR OR RACE <u>Colored</u> (17) AGE AT LAST BIRTHDAY <u>36</u> (Years)	(12) BIRTHPLACE <u>Killiam, S. C.</u>	(15) BIRTHPLACE <u>Killiam, S. C.</u>
(13) OCCUPATION <u>Fireman S. Ry.</u>	(16) OCCUPATION <u>Housekeeping</u>	(20) Number of children born to mother, including present birth <u>11</u>	(21) Number of children of this mother now living, including present birth <u>six</u>

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 12 A. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Susan Smith
(24) State whether Physician or Midwife midwife **(25)** Address of Physician or Midwife 1920 Hardway St

Given name added from a supplemental report

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

(27) Filed Nov. 19 1923 by A. J. Shan 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.