

MARGIN RESERVED FOR BINDING.
 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 1.
 Record of Columbia, Columbia, S. C.

(1) PLACE OF BIRTH

County of District
 Township of County
 OF
 Inc. Town of Hammond
 OF
 City of

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

File No. — For State Registrar Only
19655

Registration District No. 255 Registered No.
 (For use of Local Registrar)

City of (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 Ella Walker If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? <u>girl</u>	(4) Twin or Triplet? To be answered only in event of Twin or Triplet:	(5) Number in order of b. m.	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>July 1923</u> (Name of Month) (Day) (Year)
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FATHER.

(8) FULL NAME Charlie Walker

(9) PRESENT POSTOFFICE OF FATHER Bath SC

(10) COLOR OR RACE colored (11) AGE AT LAST BIRTHDAY 21
(Year)

(12) BIRTHPLACE Aiken SC

(13) OCCUPATION Chalk Bed

(20) Number of children born to mother, including present birth 12

MOTHER.

(14) NAME BEFORE MARRIAGE Maggie Stead

(15) PRESENT POSTOFFICE OF MOTHER Bath SC

(16) COLOR OR RACE colored (17) AGE AT LAST BIRTHDAY 15
(Year)

(18) BIRTHPLACE Aiken SC

(19) OCCUPATION House Work

(21) Number of children of this mother now living, including present birth 12

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 11:00 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Mama Kuhl R. 4 Augusta
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

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Registrar

(26) Witness Ella Walker, Flora Stead
 (Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed July 1923 (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.