

(1) PLACE OF BIRTH

County of Richland Co.

Township of .....

or  
Inc. Town of .....

or  
City of Columbia SC (No. .... St.; four Ward)

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

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

19931

Registration District No. 389

Registered No. 1465

(For use of Local Registrar)

2) Full Name of Child J. Edward Nickerson

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

(3) BOY OR GIRL? boy (4) Twin or Triplet? one (5) Number in order of birth one (6) Are Parents Married? yes (7) DATE OF BIRTH May 30, 1909  
To be answered only in case of Twins or Triplets Name of Month (Day) (Year)

FATHER.

(8) FULL NAME Harry Nickerson

(9) PRESENT POSTOFFICE OF FATHER 411 Whaley St

(10) COLOR OR RACE col (11) AGE AT LAST BIRTHDAY 25 (Years)

(12) BIRTHPLACE Childs SC

(13) OCCUPATION day labor

(14) Number of children born to mother, including present birth first

MOTHER

(14) NAME BEFORE MARRIAGE Eloise Hear

(15) PRESENT POSTOFFICE OF MOTHER 411 Whaley St

(16) COLOR OR RACE col (17) AGE AT LAST BIRTHDAY 23 (Years)

(18) BIRTHPLACE Columbia SC

(19) OCCUPATION Wash woman

(20) Number of children of this mother now living, including present birth four

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive (Born alive or stillborn) 9:00 M., on the date above stated. (Hour A. M. or P. M.)

(23) (Signature) W. M. G. Jones

(24) State whether Physician or Midwife mid wife (25) Address of Physician or Midwife 1417 Whaley St

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question of stillbirth is raised)

(27) Filed 6-7-09 1911 (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.

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THIS IS A PERMANENT RECORD.  
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 3, McCaw, of Columbia.