

MARGIN RESERVED FOR BINDING.

WHEN PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD. S. H.—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.

RECEIVED OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Barnwell  
Township of W. H. H. H. H.  
OR  
Inc. Town of.....  
OR  
City of.....

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

Registration District No. 513

File No.—For State Registrar Only  
**28981**

Registered No. 49  
(For use of Local Registrar)

(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 Carrie Dant

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

(3) BOY OR GIRL? Girl (4) Twin or Triplet? To be answered only in event of Twins or Triplets (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Sept 22 19 22  
(Name of Month) (Day) (Year)

**FATHER.**  
(8) FULL NAME John Dant  
(9) PRESENT POSTOFFICE OF FATHER Edmo. SC R #2  
(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 30 (Years)  
(12) BIRTHPLACE SC  
(13) OCCUPATION Farm Hand  
(20) Number of children born to mother, including present birth 7

**MOTHER.**  
(14) NAME BEFORE MARRIAGE Carrie Josie  
(15) PRESENT POSTOFFICE OF MOTHER Edmo SC R #2  
(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 34 (Years)  
(18) BIRTHPLACE SC  
(19) OCCUPATION Wife and Field Hand  
(21) Number of children of this mother now living, including present birth 5

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE**

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

(23) (Signature) William Johnson  
(24) State whether Physician or Midwife Physician or Midwife

Given name added from a supplemental report  
.....  
.....  
.....

(26) Witness W. Johnson  
(Signature of Witness necessary only when question 23 is signed by mark)  
(27) Filed Sept 28 19 22 (28) W. Johnson  
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.