

## 1. PLACE OF BIRTH

County of Richland

Township of \_\_\_\_\_

or  
Inc. Town of Columbiaor  
City of Columbia

(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

Registration District No. 38 A Registered No. 1521

(For use of Local Registrar)

(No. 1826 Huger St.; \_\_\_\_\_ Ward)

FILE No.—For State Registrar Only

Vol. 28-23699-A-222. FULL NAME OF CHILD Herman Jackson

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

3. BOY OR GIRL <u>Boy</u>	4. Twin or Triplet? <u>yes</u>	5. Number in order of birth <u>4</u>	6. Are Parents Married? <u>yes</u>	7. DATE OF BIRTH <u>July 4</u> 19 <u>22</u>
To be answered only in event of Twins or Triplets				(Name of Month) (Day) (Year)

## FATHER

8. FULL NAME John Jackson9. ADDRESS AT CHILD'S BIRTH Columbia10. COLOR OR RACE White11. AGE AT CHILD'S BIRTH 22  
(Years)

## 12. BIRTHPLACE

S. J. Kershaw

## 13. OCCUPATION

Textile20. Number of children born to mother, including present birth 4

## MOTHER

14. NAME BEFORE MARRIAGE Gussie Boatwright15. ADDRESS AT CHILD'S BIRTH Columbia, S. C.16. COLOR OR RACE White17. AGE AT CHILD'S BIRTH 25  
(Years)

## 18. BIRTHPLACE

Richland Co.

## 19. OCCUPATION

Housekeeping21. Number of children by this mother now living, including present birth 4

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

22. I hereby certify that I attended the birth of this child, who was Alive at 2 P. M.  
(Born alive or stillborn) (Hour A. M. or P. M.)  
on the date above stated.23. Signature Louise Wallace

24. State whether Physician or Midwife

Midwife

25. Address of Physician or Midwife

1507 Huger St.

Given name added from a supplemental report

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Registrar

26. Witness \_\_\_\_\_

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

27. Filed 7-20192228. E. C. McGregor

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  
Jht