

MARGIN RESERVED FOR BINDING.

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
 M.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 5.

Record of Columbia, Columbia, S. C.

Form No. 1

(1) PLACE OF BIRTH

County of Laurens

Township of Hunter

or
 Inc. Town of Lydia Mill

or
 City of

(No. St.; 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

35232

Registration District No. 92902 Registered No. 107

(For use of Local Registrar)

(2) Full Name of Child

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 case of Twin or Triplet

(5) Number in order of birth

(6) Are Parents Married?

yes

(7) DATE OF BIRTH

Sept 25 22
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Eddie Lawson

(9) PRESENT POSTOFFICE OF FATHER

Clinton, S.C.

(10) COLOR OR RACE

white

(11) AGE AT LAST BIRTHDAY 34
 (Years)

(12) BIRTHPLACE

S.C.

(13) OCCUPATION

Textile operator

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

3

MOTHER.

(14) NAME BEFORE MARRIAGE

Pauline Austin

(15) PRESENT POSTOFFICE OF MOTHER

Clinton S.C.

(16) COLOR OR RACE

white

(17) AGE AT LAST BIRTHDAY 27
 (Years)

(18) BIRTHPLACE

S.C.

(19) OCCUPATION

Housewife

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

3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 7:15 A.M. on the date above stated.
 (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

J. L. H. Bailey

(24) State whether Physician or Midwife

M.D.

(25) Address of Physician or Midwife

Clinton, S.C.

Given name added from a supplemental report

(26) Witness

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

(27) Date

Sept. 25 22

(28) J. L. H. Bailey
 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.