

**CERTIFICATE OF BIRTH**

County of San Diego.....

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

66460

Township of Stirling.....

Inc. Town of .....

Registration District No. 401 Registered No. 00

(For use of Local Registrar)

City of ..... (No. .... St.; ..... Ward)  
 Birth occurs in a hospital or other institution, give name of same instead of street and number.)

2) Full Name of Child. Yand Goodman If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Girl (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? No (7) DATE OF BIRTH June 22, 1966  
(Name of Month) (Day) (Year)

# FATHER

9. FULL NAME Nick Goldman

PRESENT  
POSTOFFICE  
FEATHER

(10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY 28 (Years)

12) BIRTHPLACE

131 OCCUPATION	1
----------------	---

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

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE:**

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

(23) (Signature) William H. Galt

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

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

(27) Filed 6-27-1916 (28) *B. M. ...* 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.

When there was no attendance, playground or otherwise, during the summer, householders, etc., should make this report. If a child breathes even once, it must not be reported as stillborn. The report is desired of stillborns, those who are born, but not of miscarriages.