

MARGIN RESERVED FOR ENDING.
 WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
 N. 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.
 COUNTY OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Berkeley
 Township of St. Stephens
 or
 Inc. Town of _____
 or
 City of _____

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

File No.—For State Registrar Only
80386

Registration District No. 70.5 Registered No. 60
 (For use of Local Registrar)

(2) Full Name of Child Bertha Melford

St. _____ Ward _____
 (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL? Girl (4) Twin or Triplet? — (5) Number in order of birth — (6) Are Parents Married? yes (7) DATE OF BIRTH aug 25, 1916
To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Daniel Melford
 (9) PRESENT POSTOFFICE OF FATHER St Stephens, SC
 (10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 35
(Years)
 (12) BIRTHPLACE Berkeley Co
 (13) OCCUPATION Farmer
 (20) Number of children born to mother, including present birth 3

MOTHER.

(14) NAME BEFORE MARRIAGE Irene Peddygrew
 (15) PRESENT POSTOFFICE OF MOTHER St Stephens, SC
 (16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 30
(Years)
 (18) BIRTHPLACE Berkeley Co
 (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 alive at 5 A.M.
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) R. M. Boykin
 (24) State whether Physician or Midwife Midwife Address of Physician or Midwife St Stephens SC

Given name added from a supplemental report _____
 19 _____ Registrar

(26) Witness R. M. Boykin
(Signature of Witness necessary only when question 23 is signed by mark)
 (27) Sept 31 1916 (28) R. M. Boykin
 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.