

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 space.

(1) PLACE OF BIRTH

County of Richland
Township of Richland
or
Inc. Town of
or
City of Columbia S.C.
(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
13864

Registration District No. Registered No.
(No. St.; Ward)
(For use of Local Registrar)

(2) Full Name of Child

(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth Three (6) Are Parents Married? Yes (7) DATE OF BIRTH June 2, 1923
(If child is not yet named, make supplemental report as directed)

FATHER.
(8) FULL NAME John H. Campson

(9) PRESENT POSTOFFICE OF FATHER Columbia 1701 Bland

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 23 (Year)

(12) BIRTHPLACE S.C.

(13) OCCUPATION Car Repairer

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

MOTHER.
(14) NAME BEFORE MARRIAGE Mary E. Williams

(15) PRESENT POSTOFFICE OF MOTHER Columbia 1701 Bland

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 29 (Year)

(18) BIRTHPLACE S.C.

(19) OCCUPATION Domestic

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

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was alive on the date above stated.

(23) (Signature) W. A. Sloan (Born alive or stillborn) at 6 P. M.

(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife W. A. Sloan

(26) Name added from a supplemental report

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

(27) FILE June 13, 1923 (29) A. G. Sloan Local Registrar

When there was no attending physician or midwife, when the father, householder, etc., should make this return, child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.

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