

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
 MARGIN RESERVED FOR BINDING.
 No. 2.—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.
 Registrar Columbia, Columbia, S. C.

(1) PLACE OF BIRTH

County of Anderson
 Township of North
 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
35317

Registration District No. 3-1-3 Registered No. 82
 (For use of Local Registrar)

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

(2) Full Name of Child Edna May (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 4 (6) Are Parents Married? Yes (7) DATE OF BIRTH Sept 4 1922
 (Name of Month) (Day) (Year)
 To be answered only in event of Twins or Triplets

FATHER.

(8) FULL NAME Henry Howell
 (9) PRESENT POSTOFFICE OF FATHER Anderson
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 31
 (Year)
 (12) BIRTHPLACE S. C.
 (13) OCCUPATION Merchant

MOTHER.

(14) NAME BEFORE MARRIAGE Etie Mae
 (15) PRESENT POSTOFFICE OF MOTHER Anderson
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 25
 (Year)
 (18) BIRTHPLACE S. C.
 (19) OCCUPATION Housewife

(20) Number of children born to mother, including present birth 4

(21) Number of children of this mother now living, including present birth 10

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) W. W. French
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Anderson

Given name added from a supplemental report

 Registrar

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

(27) Filed Oct 10 1922 (28) W. W. French 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.