

MARGIN RESERVED FOR BINDING.
 WHITE 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 6.
 DEPARTMENT OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Charleston
 Township of Pacolet
 or
 Inc. Town of Pacolet
 or
 City of Pacolet

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

File No.—For State Registrar Only
40064

Registration District No. 4006

Registered No.
 (For use of Local Registrar)

(2) Full Name of Child

James Wilson

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

(3) BOY OR GIRL Boy (4) Twin or Triplets Triplets (5) Number in order of birth 1 (6) Are Parents Married? No (7) DATE OF BIRTH July 6 22
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME James Wilson
 (9) PRESENT POSTOFFICE OF FATHER Pacolet
 (10) COLOR OR RACE Blk (11) AGE AT LAST BIRTHDAY 15
 (12) BIRTHPLACE Pacolet S.C.
 (13) OCCUPATION Farmer
 (20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Lettie Wilson
 (15) PRESENT POSTOFFICE OF MOTHER Pacolet (dead)
 (16) COLOR OR RACE Blk (17) AGE AT LAST BIRTHDAY 15
 (18) BIRTHPLACE Pacolet S.C.
 (19) OCCUPATION Farmer (before death)
 (21) Number of children of this mother now living, including present birth none

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 12 P.M.
 on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)

(23) (Signature) James Caldwell
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Pacolet

Given name added from a supplemental report

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

(27) Filed 19 (28) 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.