

22 049360

## Standard Certificate of Birth

FILE No.—For State Registrar Only

00507

## 1. PLACE OF BIRTH

County of Riceland

STATE OF SOUTH CAROLINA

Township of Columbiaor  
Inc. Town of \_\_\_\_\_Registration District No. 38-a  
738 7th StreetRegistered No. \_\_\_\_\_  
(For use of Local Registrar)City of Columbia

(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 Algie Melvin Vause

{ If child is not yet named, make supplemental report as directed.

3. Boy or Girl <b>Boy</b>	If Plural births {	4. Twin, triplet or other _____	5. Number, in order of birth _____	6. Premature <u>Yes</u> Full term _____	7. Are Parents <u>Yes</u> Married? _____	8. Date of birth <u>May 21</u> 19 <u>22</u> (Month, day, year)
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9. Full name Arthur McDonald Vause18. Name before marriage Mollie Jones10. Residence (mailing address) Columbia, S.C.  
(If non-resident, give place and State)19. Residence (mailing address) Columbia, S.C.  
(If non-resident, give place and State)11. Color or race W12. Age at child's birth 34 (years)20. Color or race W21. Age at child's birth 32 (years)13. Birthplace (city or place) Sumter County  
(State or country)22. Birthplace (city or place) Florence County  
(State or country)14. Trade, profession, or particular  
kind of work done, as spinner,  
sawyer, bookkeeper, etc.23. Trade, profession, or particular  
kind of work done, as house-  
keeper, typist, nurse, clerk, etc.15. Industry or business in which  
work was done, as silk mill,  
sawmill, bank, etc. Mill Worker24. Industry or business in which  
work was done, as own home,  
lawyer's office, silk mill, etc. Housewife16. Date (month and year) last  
engaged in this work May 21 192217. Total time (years)  
spent in this work 1925. Date (month and year) last  
engaged in this work \_\_\_\_\_, 19\_\_\_\_26. Total time (years)  
spent in this work 1627. Number of children of this mother  
(At time of birth and including this child) (a) Born alive and now living 6 (b) Born alive but now dead 1 (c) Stillborn 028. If stillborn,  
period of gestation \_\_\_\_\_  
months  
weeks

29. Cause of stillbirth \_\_\_\_\_

{ Before labor \_\_\_\_\_  
During labor \_\_\_\_\_

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify to the birth of this child, who was Alive at 10 A m. on the date above stated.  
(Born alive or stillborn){ When there was no attending physician  
or midwife, then the father, householder,  
etc., should make this return.(Signed) Arthur McDonald Vause Parent  
or Father Guardian

Given name added from \_\_\_\_\_

a supplementary report \_\_\_\_\_  
(Date of) \_\_\_\_\_Address R. #3 Box 107-A Timmonsville SCFiled Aug. 28 1946 Thos. F. Lesesne

Registrar

Registrar

m

MARGIN RESERVED FOR BINDING

WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD  
N. B.—In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each, in order of birth, stated.  
(See Instructions on Back of Certificate)