

MARGIN RESERVED FOR BINDING

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 6.
MOGAW OF COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Darrell
Township of Baldre
or
Inc. Town of

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

File No. -- For State Registrar Only
84400

Registration District No. 572 Registered No. 63
(For use of Local Registrar)
St.; Ward)

(2) Full Name of Child Emmett Roberts (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL? <u>boy</u>	(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>Nov 3 1916</u> (Name of Month) (Day) (Year)
FATHER.		MOTHER.		
(8) FULL NAME <u>Emmett Roberts</u>	(14) NAME BEFORE MARRIAGE <u>Florrie Nixon</u>			
(9) PRESENT POSTOFFICE OF FATHER <u>Daidoc S.C.</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Baldre S.C.</u>			
(10) COLOR OR RACE <u>Negro</u>	(11) AGE AT LAST BIRTHDAY <u>24</u> (Years)	(16) COLOR OR RACE <u>Negro</u>		(17) AGE AT LAST BIRTHDAY <u>21</u> (Years)
(12) BIRTHPLACE <u>SC</u>	(18) BIRTHPLACE <u>SC</u>			
(13) OCCUPATION <u>Farm Labourer</u>	(19) OCCUPATION <u>Farm Labourer</u>			
(20) Number of children born to mother, including present birth <u>3</u>	(21) Number of children of this mother now living, including present birth <u>3</u>			

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 1140 P.M. on the date above stated.
(23) (Signature) F. H. Boyd
(24) State whether Physician or Midwife
(25) Address of Physician or Midwife Physician Adendale S.C.

Given name added from a supplemental report
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..... 19 ..
Registrar

(26) Witness
(Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed Nov 3 1916 (28) F. H. Boyd M.D.
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.