

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 5.

MOHAMMAD COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Orangeburg
Township of Orangeburg
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

23476

Registration District No. 5613

Registered No. 93
(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 Israel Wright

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

(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Jan 20 1922
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Clifton, Wright,
(9) PRESENT POSTOFFICE OF FATHER Arby SC
(10) COLOR OR RACE Col. (11) AGE AT LAST BIRTHDAY 22
(Years)
(12) BIRTHPLACE Arby co SC
(13) OCCUPATION Work on farm
(20) Number of children born to mother, including present birth 2

MOTHER.

(14) NAME BEFORE MARRIAGE Lucie, Burns
(15) PRESENT POSTOFFICE OF MOTHER Arby SC
(16) COLOR OR RACE Col. (17) AGE AT LAST BIRTHDAY 21
(Years)
(18) BIRTHPLACE Arby co SC
(19) OCCUPATION Work on farm
(21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was white at 10 A.M.
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Program Bridges midwife

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Orangeburg SC

Given name added from a supplemental report

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

(27) Filed July 20 1922 (28) A. L. Fairley
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.