

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 5.

MOGAW OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County Laurie
Township of Hamlet
OR
Inc. Town of
OR
City of

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

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

File No.—For State Registrar Only
15613

Registration District No. 2912 Registered No. 517
(For use of Local Registrar)

(2) Full Name of Child

William Henry Pyles (No. St.; Ward)
(If child is not yet named, make supplemental report as directed)

(3) <u>Boy</u> OR GIRL?	(4) <u>Twin</u> or Triplet?	(5) <u>1</u> Number in order of birth To be answered only in event of Twins or Triplets	(6) <u>Yes</u> Are Parents Married?	(7) <u>May 12 22</u> DATE OF BIRTH (Name of Month) (Day) (Year)
FATHER			MOTHER.	
(8) <u>Henry Pyles</u> FULL NAME			(14) <u>Mary Young</u> NAME BEFORE MARRIAGE	
(9) <u>Householder</u> PRESENT POSTOFFICE OF FATHER			(15) <u>Housewife</u> PRESENT POSTOFFICE OF MOTHER	
(10) <u>Wesn</u> COLOR OR RACE	(11) <u>25</u> AGE AT LAST BIRTHDAY (Year)	(16) <u>Wesn</u> COLOR OR RACE	(17) <u>25</u> AGE AT LAST BIRTHDAY (Year)	
(12) <u>Laurie Co</u> BIRTHPLACE			(18) <u>Laurie Co</u> BIRTHPLACE	
(13) <u>Farmer</u> OCCUPATION			(19) <u>House</u> OCCUPATION	
(20) <u>2</u> Number of children born to mother, including present birth			(21) <u>2</u> Number of children of this mother now living, including present birth	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature) Dr. J. B. Pyles
(24) State Physician or Midwife (25) Address of Physician or Midwife Hamlet

Given name added from a supplemental report

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

(27) Filed May 13 22 (28) J. B. Pyles 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.