

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.

MECAW OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Richland
Township of Sower
OR
Inc. Town of
OR
City of

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

Registration District No. 3803

File No.—For State Registrar Only
23724

Registered No. 231236
(For use of Local Registrar)

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

(2) Full Name of Child Henry Emerson

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 No (6) Are Parents Married? No (7) DATE OF BIRTH May 24 1922
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME
(9) PRESENT POSTOFFICE OF FATHER
(10) COLOR OR RACE (11) AGE AT LAST BIRTHDAY
(12) BIRTHPLACE
(13) OCCUPATION
(20) Number of children born to mother, including present birth

MOTHER.

(14) NAME BEFORE MARRIAGE Alma Emerson
(15) PRESENT POSTOFFICE OF MOTHER Hopkins S.C.
(16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 15
(18) BIRTHPLACE S.C.
(19) OCCUPATION Farming
(21) 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 1... A.M.,
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Julia Williams
(24) State whether Physician or Midwife (25) Address of Physician or Midwife Hopkins S.C.

Given name added from a supplemental report

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

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(27) Filed July 23 1922 (28) Mrs. M. J. M.
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.