

MARGIN RESERVED FOR BINDING.

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD
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.

Form No. 5

State of Columbia, Columbia, S. C.

(1) PLACE OF BIRTH

County of Calhoun
Township of Walter
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
934

Registration District No. 1409 Registered No. 41
(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 Charles Wesley Arsky (No. St. Ward) 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 1st (6) Are Parents Married? yes (7) DATE OF BIRTH Jan. 4, 1922
(Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME Ed Arsky
(9) PRESENT POSTOFFICE OF FATHER Haltershoed, S.C.
(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 38
(Years)
(12) BIRTHPLACE SC
(13) OCCUPATION Farming
(20) Number of children born to mother, including present birth 1 7

MOTHER
(14) NAME BEFORE MARRIAGE James Pula McQueen
(15) PRESENT POSTOFFICE OF MOTHER Haltershoed, S.C.
(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 28
(Years)
(18) BIRTHPLACE SC
(19) OCCUPATION Domestic
(21) Number of children of this mother now living, including present birth 1 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born at 2:30 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) William W. Haskins
(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Waltershoed, SC

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed Feb. 10, 1922 (28) J. N. H. Blaise 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.

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