

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.
 Secular of Columbia, Columbia, S. C.

(1) PLACE OF BIRTH

County of Edgefield
 Township of
 OF
 Inc. Town of Colliers
 OF
 City of

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

File No.—For State Registrar Only
34249

Registration District No. 1803, Registered No. 29
 (For use of Local Registrar)

City of (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 Alberta Clam (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL girl (4) Twin or Triplet? To be answered only in event of Twins or Triplets
 (5) Number in order of birth (6) Are Parents Married? yes
 (7) DATE OF BIRTH Oct 20 1922
 (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME John Baptist Clam
 (9) PRESENT POSTOFFICE OF FATHER Colliers
 (10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 32
 (Year)
 (12) BIRTHPLACE S.C.
 (13) OCCUPATION Farmer Work
 (20) Number of children born to mother, including present birth 1

MOTHER.
 (14) NAME BEFORE MARRIAGE Hard
 (15) PRESENT POSTOFFICE OF MOTHER Colliers
 (16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 18
 (Year)
 (18) BIRTHPLACE S.C.
 (19) OCCUPATION Housewife
 (21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 5 P. M.
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Maria Manning
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife
Colliers S.C.

Given name added from a supplemental report

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

(27) Filed Oct 30 1922 (28) J. S. Miles
 Local Registrar

*When there was no attending physician or midwife, then the father, householder, etc., should make this report. 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.