

MARGIN RESERVED FOR BINDING

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

DEPT. OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH
 County of Richland
 Township of Serk
 OR
 Inc. Town of

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

Registration District No. 3802 Registered No. 7A
 (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.)

File No.—For State Registrar Only
36284

(2) Full Name of Child Denis Lee Quick
 (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL Girl (4) Twin or Triplet? (5) Number in order of birth 3 (6) Are Parents Married (7) DATE OF BIRTH May 16 22
 (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME Earl Miller Quick
 (9) PRESENT POSTOFFICE OF FATHER Chapin
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 27
 (Years)
 (12) BIRTHPLACE SC
 (13) OCCUPATION Farmer
 (20) Number of children born to mother, including present birth 3

MOTHER.
 (14) NAME BEFORE MARRIAGE Leona Cona Landers
 (15) PRESENT POSTOFFICE OF MOTHER Chapin
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 24
 (Years)
 (18) BIRTHPLACE SC
 (19) OCCUPATION Housewife
 (21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.
 (22) I hereby certify that I attended the birth of this child, who was born alive at H. P. on the date above stated.
 (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) [Signature]
 (24) State whether Physician or Midwife Mid. (25) Address of Physician or Midwife Ballentine

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
 (27) Filed May 16 22 (28) [Signature] 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.