

MARCH RESERVED FOR MARRIAGE
 THESE TABLETS, WITH PREVIOUS PERMISSION, IS A SEPARATE BLANK FOR EACH CHILD, AND MARK THE
 FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.
 DEPARTMENT OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH
 County of Calhoun
 Township of Amelia
 or
 Inc. Town of

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

File No.—For State Registrar Only
 88620

Registration District No. 800 Registered No. 168
 (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 Minta Swin If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? <u>girl</u>	(4) Twin or Triplet? <input checked="" type="checkbox"/>	(5) Number in order of birth <u>one</u>	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>Nov 22, 1906</u> <small>(Name of Month) (Day) (Year)</small>
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FATHER.		MOTHER.	
(8) FULL NAME <u>Billie Swin</u>	(14) NAME BEFORE MARRIAGE <u>Mary Ann Kitt</u>	(9) PRESENT POSTOFFICE OF FATHER <u>H Mott</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>H Mott</u>
(10) COLOR OR RACE <u>negro</u>	(11) AGE AT LAST BIRTHDAY <u>45</u> <small>(Years)</small>	(16) COLOR OR RACE <u>negro</u>	(17) AGE AT LAST BIRTHDAY <u>35</u> <small>(Years)</small>
(12) BIRTHPLACE <u>S.C.</u>	(18) BIRTHPLACE <u>S.C.</u>	(13) OCCUPATION <u>Home laborer</u>	(19) OCCUPATION <u>Home laborer</u>
(20) Number of children born to mother, including present birth <u>seven</u>	(21) Number of children of this mother now living, including present birth <u>seven</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was ... alive ... at ... 1 ... M., on the date above stated.
(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Minta Swin
 (24) State whether Physician or Midwife
 (25) Address of Physician or Midwife
H Mott

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

(27) Filed Dec 3, 1906 (28) W. B. Apple
Local Registrar.

Given name added from a supplemental report

19 .. 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.

D A K S A F E T Y