

NOTE: 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.

OFFICE OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Aiken
 Township of Langley
 or
 Inc. Town of
 or
 City of Langley
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

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

File No.—For State Registrar Only
28593

Registration District No. V.I. 7. A Registered No. 91
 (For use of Local Registrar)

(2) Full Name of Child Marie Allen

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 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Sept 26 1922
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Walter Allen
 (9) PRESENT POSTOFFICE OF FATHER Langley St
 (10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 26 (Years)
 (12) BIRTHPLACE Tenn
 (13) OCCUPATION Cotton Mill Work
 (20) Number of children born to mother, including present birth 4

MOTHER.

(14) NAME BEFORE MARRIAGE Pansy Walker
 (15) PRESENT POSTOFFICE OF MOTHER Langley St
 (16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 23 (Years)
 (18) BIRTHPLACE Aiken Co S.C.
 (19) OCCUPATION Domestic
 (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 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. P. Patterson, M.D.
 (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Langley St

Given name added from a supplemental report

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

(27) Filed Oct 7 1922 (28) L. W. Spradley 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.