

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.

(1) PLACE OF BIRTH

County of Darlington
Township of Philadelphia
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
85262

Registration District No. 1509 Registered No. 70
(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 Leonard Side

If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Boy (4) Twin or Triplet? 2 (5) Number in order of birth 2 (6) Are Parents Married? Yes (7) DATE OF BIRTH Oct 26, 1966
(Names of Month) (Day) (Year)

FATHER.

(8) FULL NAME Phillip Side
(9) PRESENT POSTOFFICE OF FATHER Limmersville S.C.
(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 29 (Years)
(12) BIRTHPLACE Darlington S.C.
(13) OCCUPATION Farmer

(20) Number of children born to mother, including present birth 2

MOTHER.

(14) NAME BEFORE MARRIAGE Mary Thomas
(15) PRESENT POSTOFFICE OF MOTHER Limmersville S.C.
(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 25 (Years)
(18) BIRTHPLACE Darlington S.C.
(19) OCCUPATION House wife

(21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 8 P.M. on the date above stated.
(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Isabella Side

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

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

(27) Filed Oct 26, 1966. (28) L. St. Jordan 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.