

2/16/42

MARGIN RESERVED FOR BINDING

WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD
 N. B.—In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each, in order of birth, stated.

(See instructions on Back of Certificate.)

1. PLACE OF BIRTH

County of RichlandTownship of Childs

or

Inc. Town of

or

City of

(If birth occurs in a hospital or other institution, give name of same instead of street and number)

Standard Certificate of Birth

STATE OF SOUTH CAROLINA

Registration District No. 3823

Registered No.

(For use of Local Registrar)

22 049497

FILE No.—For State Registrar Only

02316

2. FULL NAME OF CHILD

Ernest Mack, Jr.

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

3. Boy or Girl

If Plural births

4. Twin, triplet or other

6. Premature

7. Are Parents

8. Date of birth

January 22 1942

(Month, day, year)

Boy

5. Number, in order of birth

Full term YesMarried? Yes

9. Full name

FATHER

Ernest Mack

18. Name before marriage

MOTHER

Mary Brown

10. Residence (mailing address)

(If non-resident, give place and State) Childs, S. C.

19. Residence (mailing address)

(If non-resident, give place and State) Childs, S. C.

11. Color or race

Col.

12. Age at child's birth

21

(years)

20. Color or race

Col.

21. Age at child's birth

20

(years)

13. Birthplace (city or place)

(State or country)

South Carolina

22. Birthplace (city or place)

(State or country)

South Carolina

OCCUPATION

14. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc.

Farmer

15. Industry or business in which work was done, as silk mill, sawmill, bank, etc.

16. Date (month and year) last engaged in this work

17. Total time (years)

19

spent in this work

OCCUPATION

23. Trade, profession, or particular kind of work done, as house-keeper, typist, nurse, clerk, etc.

House Keeping

24. Industry or business in which work was done, as own home, lawyer's office, silk mill, etc.

25. Date (month and year) last engaged in this work

26. Total time (years)

19

spent in this work

27. Number of children of this mother

(At time of birth and including this child (a) Born alive and now living 6

(b) Born alive but now dead

(c) Stillborn 2

28. If stillborn, period of gestation

months

weeks

29. Cause of stillbirth

Before labor

During labor

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify to the birth of this child, who was B. alive at 1:00 A. m. on the date above stated.
 (Born alive or stillborn)

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

Given name added from

a supplementary report

(Date of)

Registrar.

(Signed) Mary Brown Parent

or Guardian

Address 715 Assembly St., Columbia, S.C.Filed Feb. 25, 1942 M. B. Woodward, M.D.

Registrar.