

WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD
 N. B.—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 2

(1) PLACE OF BIRTH
 County of Richland
 Township of Columbia
 Inc. Town of Columbia
 City of Columbia
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)
 Registration District No. 35 Registered No. 131
 (For use of Local Registrar)
 (No. 1810 Hardens Ward rear)

File No.—For State Registrar Only
5040

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

(3) BOY OR GIRL boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Feb. 28, 23
 (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME George Grant
 (9) PRESENT POSTOFFICE OF FATHER Columbia
 (10) COLOR OR RACE colored (11) AGE AT LAST BIRTHDAY 4
 (12) BIRTHPLACE Wrensburg
 (13) OCCUPATION Laborer
 (20) Number of children born to mother, including present birth 13

MOTHER.
 (14) NAME BEFORE MARRIAGE Annie Mickins
 (15) PRESENT POSTOFFICE OF MOTHER Columbia S.C.
 (16) COLOR OR RACE colored (17) AGE AT LAST BIRTHDAY 37
 (18) BIRTHPLACE Chester S.C.
 (19) OCCUPATION Housekeeper
 (21) Number of children of this mother now living, including present birth 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE
 (22) I hereby certify that I attended the birth of this child, who was Born alive at 2:30 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Chas. A. S. Slocum
 (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Columbia S.C.

(26) Witnesses (Signature of Witness necessary only when question 23 is signed by mark)
 (27) Filed March 6, 1923 (28) W. J. Slocum 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.

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