

WHERE FEASIBLE, 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 5.
 S. C. DEPT. OF HEALTH, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Richland
 Township of
 or
 Inc. Town of
 or
 City of Columbia
 (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
87133

Registration District No. 38a Registered No. 1494
 (For use of Local Registrar)
 (No. 111 Gate St.; Ward)

(2) Full Name of Child Robert James

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

(3) BOY OR GIRL? <u>h d</u>	(4) Twin or Triplet? <u>To be answered only in event of Twins or Triplets</u>	(5) Number in order of birth	(6) Are Parents Married?	(7) DATE OF BIRTH <u>10/10/16</u> (Name of Month) (Day) (Year)
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FATHER.

(8) FULL NAME Walter Cloud Bourder

(9) PRESENT POSTOFFICE OF FATHER Columbia

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 47 (Years)

(12) BIRTHPLACE South Carolina

(13) OCCUPATION machinist

20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Thelma Jones

(15) PRESENT POSTOFFICE OF MOTHER Columbia

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 20 (Years)

(18) BIRTHPLACE North Carolina

(19) OCCUPATION

21) Number of children of this mother now living, including present birth None

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was at 12 P. M.,
 on the date above stated. (Born ~~alive~~ stillborn) (Hour A. M. or P. M.)

(23) (Signature) Lee Cindus Boyd
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

 Registrar 19

(26) Witness A. J. ...
 (Signature of Witness necessary only when question 23 is signed by mark)
 (27) Filed 10/24/16 19 16 Local Registrar

When there was no attending physician or midwife, then the father, householders, 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.