

THIS IS A PERMANENT RECORD.  
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 Richland  
Township of Blythewood  
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  
**31988**

Registration District No. 3800

Registered No. 118  
(For use of Local Registrar)

(No. .... St. .... Ward)  
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Brooks Boney {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 Sept 7 1922  
(Name of Month) (Day) (Year)

FATHER.  
8) FULL NAME Durham B Boney  
9) PRESENT POSTOFFICE OF FATHER Blythewood S.C.  
10) COLOR OR RACE white 11) AGE AT LAST BIRTHDAY 45  
(Years) 12) BIRTHPLACE Blythewood S.C.  
13) OCCUPATION Merchant

MOTHER.  
14) NAME BEFORE MARRIAGE Alice Jane Boney  
15) PRESENT POSTOFFICE OF MOTHER Blythewood S.C.  
16) COLOR OR RACE white 17) AGE AT LAST BIRTHDAY 37  
(Years) 18) BIRTHPLACE Blythewood S.C.  
19) OCCUPATION Domestic

20) Number of children born to mother, including present birth Six 21) Number of children of this mother now living, including present birth Five

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Alive at 8:10 P.M. on the date above stated. (Born alive or stillborn) (Hour, A. M. or P. M.)

(23) (Signature) W. L. Langford M.D. (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 23 is signed by mark)

(27) Filed Sept 15 1922 (28) W. L. Langford 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.

Registrar W. L. Langford Local Registrar

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