

WHEN FILING WITH UNPAID FEE—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.

Minister of Columbia, Columbia, S. C.

(1) PLACE OF BIRTH

County of Union
Township of Bryansville
or
Inc. Town of
or
City of Buffalo

CERTIFICATE OF BIRTH
STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of Health

File No.—For State Registrar Only
2655

Registration District No. 42B Registered No. 21
(For use of Local Registrar)

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

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

(3) BOY OR GIRL girl (4) Twin or Triplet? Twins (5) Number in order of birth 1 (6) Are Parents Married? No (7) DATE OF BIRTH Jan 5 1922
(Name of Month) (Day) (Year)

FATHER

(8) FULL NAME
(9) PRESENT POSTOFFICE OF FATHER
(10) COLOR OR RACE
(11) BIRTHPLACE
(12) OCCUPATION
(13) (14) AVERAGE BIRTHDAY (Year)

MOTHER

(14) NAME BEFORE MARRIAGE Willie May Briggs
(15) PRESENT POSTOFFICE OF MOTHER Buffalo SC
(16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 14 (Year)
(18) BIRTHPLACE S.C.
(19) OCCUPATION Labore

(20) Number of children born to mother, including present birth 2 (21) Number of children of this mother now living, including present birth D

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature) J. P. Hammond
(24) State whether: Physician or Midwife (25) Address of Physician or Midwife Buffalo SC

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed Jan 1 1922 (28) J. P. Hammond 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.

*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.