

## (1) PLACE OF BIRTH

County of

Township of

Inc. Town of

City of

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

## (2) Full Name of Child

(3) BOY OR GIRL

(4) Twin

(5) Number in order of birth

(6) Are Parents Married

(7) DATE OF BIRTH

(8) NAME BEFORE MARRIAGE

(9) PRESENT POSTOFFICE OF MOTHER

(10) COLOR OF RACE

(11) AGE AT LAST BIRTHDAY

(12) BIRTHPLACE

(13) OCCUPATION

(14) Number of children born to mother, including present birth

(15) NAME BEFORE MARRIAGE

(16) PRESENT POSTOFFICE OF MOTHER

(17) COLOR OF RACE

(18) AGE AT LAST BIRTHDAY

(19) BIRTHPLACE

(20) OCCUPATION

(21) Number of children of this mother now living, including present birth

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

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

(26) Witness (27) Filed (28) Local Registrar

(29) 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.

(30) 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.

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No. — For State Registrar Only

710

Registration District No.

Registered No.

(For use of Local Registrar)

Ward

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

MARGIN RESERVED FOR BINDING.

WRITE PLAINLY, WITH INK AND IN CAPITAL LETTERS. THIS IS A PERMANENT RECORD. IN CASE OF TWIN OR TRIPLETS, USE A SEPARATE BLANK FOR EACH CHILD, AND MARK BY FIRST, SECOND, ETC., THE OTHERS, No. 2, etc., in question 2.

City of Columbia