

REMAIN RESERVED FOR BINDING.  
WHITE 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 make the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

RECAP OF COLUMBIA, B. C.

(1) PLACE OF BIRTH

County of Berkley  
Township of Mt. Vernon  
or  
Inc. Town of .....  
or  
City of .....

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

Registration District No. 702 Registered No. 71  
(For use of Local Registrar)

File No.—For State Registrar Only  
**29068**

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

(2) Full Name of Child Solomon Mangault

(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 Apr-11 19 22  
(Name of Month) (Day) (Year)

**FATHER.**  
(8) FULL NAME F. J. Mangault  
(9) PRESENT POSTOFFICE OF FATHER Macbeth St.  
(10) COLOR OR RACE Col (11) AGE AT LAST BIRTHDAY 28 (Year)  
(12) BIRTHPLACE O.C.  
(13) OCCUPATION Farmer  
(20) Number of children born to mother, including present birth 15

**MOTHER.**  
(14) NAME BEFORE MARRIAGE Eugenie Akin  
(15) PRESENT POSTOFFICE OF MOTHER Macbeth St.  
(16) COLOR OR RACE Col (17) AGE AT LAST BIRTHDAY 23 (Year)  
(18) BIRTHPLACE O.C.  
(19) OCCUPATION Housewife  
(21) Number of children of this mother now living, including present birth 15

**CERTIFICATE OF A ATTENDING PHYSICIAN OR MIDWIFE\***

(22) I hereby certify that I attended the birth of this child, who was... Alive... at 5 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Dusan M. Gray  
(24) State whether Physician or Midwife (25) Address of Physician or Midwife M. E. B. Co.

Given name added from a supplemental report

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

(27) Filed Apr-18 19 22 (28) R. E. M. Gray 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.