

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
 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 6.
 Registrar of Columbia, Columbia, S. C.

(1) PLACE OF BIRTH
 County of Wm.burg
 Township of Indian
 or
 Inc. Town of
 or
 City of (No. St.; Ward)

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

File No.—For State Registrar Only
9451

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

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

(3) BOY OR GIRL (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? yes (7) DATE OF BIRTH Mar 21 1922
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER
 (8) FULL NAME Carvin Berch
 (9) PRESENT POSTOFFICE OF FATHER Cooper S.C.
 (10) COLOR OR RACE B (11) AGE AT LAST BIRTHDAY 35 (Years)
 (12) BIRTHPLACE S.C.
 (13) OCCUPATION Farmer
 (20) Number of children born to mother, including present birth 1

MOTHER
 (14) NAME BEFORE MARRIAGE Julia Samule
 (15) PRESENT POSTOFFICE OF MOTHER Cooper
 (16) COLOR OR RACE B (17) AGE AT LAST BIRTHDAY 22 (Years)
 (18) BIRTHPLACE S.C.
 (19) OCCUPATION Housewife
 (21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Alive at M., on the date above stated. (Born alive or stillborn) (Hour, A. M. or P. M.)
 (23) (Signature) Melis Cooper midwife
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

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 Registrar

(26) Witness Carvin Berch (Signature of Witness necessary only when question 23 is signed by mark)
 (27) Filed Apr 8 1922 C. C. Daniel 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.