

MARGIN RESERVED FOR BINDING.

WRITE 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 mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

MOGAW OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH
 County of Marlboro,
 Township of Smithville,
 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
73956

Registration District No. 3306... Registered No. 67.....
 (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 James Troy Quick,
 (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL? <u>Boy</u>	(4) Twin or Triplet? To be answered only in event of Twins or Triplets	(5) Number In order of birth	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>July 3/1916</u> (Name of Month) (Day) (Year)
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FATHER.
 (8) FULL NAME Shufford Quick,
 (9) PRESENT POSTOFFICE OF FATHER Bennettsville, S.C.
 (10) COLOR OR RACE White, (11) AGE AT LAST BIRTHDAY 25 (Years)
 (12) BIRTHPLACE S.C.
 (13) OCCUPATION Farmer,
 (20) Number of children born to mother, including present birth { 3

MOTHER.
 (14) NAME BEFORE MARRIAGE dessie Chavis,
 (15) PRESENT POSTOFFICE OF MOTHER Bennettsville, S.C.
 (16) COLOR OR RACE White, (17) AGE AT LAST BIRTHDAY 21 (Years)
 (18) BIRTHPLACE S.C.
 (19) OCCUPATION House Work,
 (21) Number of children of this mother now living, including present birth { 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was ... alive at 4 A.M.,
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) <u>Christian Chavis</u> , (24) State whether Physician or Midwife <u>Midwife</u> ,	(25) Address of Physician or Midwife <u>Bennettsville, S.C.</u>
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Given name added from a supplemental report

 19
 Registrar

(26) Witness
 (Signature of Witness necessary only when question 23 is signed by mark)
 (27) Filed July 4/1916... (28) W. H. Pruitt
 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.