

## (1) PLACE OF BIRTH

County of RichlandTownship of EdgewoodInc. Town of  
orCity of Columbia

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

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

16442

Registration District No.....

Registered No.....

(For use of Local Registrar)

No. Mc Duffie Ave. St. ..... Ward .....(2) Full Name of Child Louise Elizabeth Cook

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

(3) BOY OR GIRL? Girl

(4) Twin or triplet?

(5) Number in order of birth

To be answered only in event of Twins or Triplets

(6) Are Parents Married? Yes

(7) DATE OF BIRTH

(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME

Clarence Cook

(9) PRESENT POSTOFFICE OF FATHER

Edgewood S.C.

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

(Years)

29

(12) BIRTHPLACE

Blaney S.C.

(13) OCCUPATION

Carpenter

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

5

## MOTHER.

(14) NAME BEFORE MARRIAGE

Louise Hornsby

(15) PRESENT POSTOFFICE OF MOTHER

Edgewood S.C.

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

(Years)

24

(18) BIRTHPLACE

Blaney S.C.

(19) OCCUPATION

Wife

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

5

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 10:00 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Ellen Brown(Midwife)

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Edgewood S.C.

Given name added from a supplemental report

191.....

Registrar

(26) Witness

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

(27) Filed June 10, 1922(28) E. C. Mc Gregor

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.

before the fifth month of pregnancy.

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

Cav. of Columbia

MAILED SEP 10 1922