

(1) PLACE OF BIRTH

County of

Richland

Township of

or
Inc. Town of

City of

Columbia S.C. (No. 625 Islanding St.; 5th Ward)
(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

91478

Registration District No. 372

Registered No. 367

(For use of Local Registrar)

(2) Full Name of Child

J. W. Kelley

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

(3) BOY OR GIRL?

boy

(4) Twin or Triplet?

L

(5) Number in order of birth

L

To be answered only in event of Twins or Triplets

(6) Are Parents Married?

yes

(7) DATE OF BIRTH

Dec 16, 1916

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

H. K. Kelley

(9) PRESENT POSTOFFICE OF FATHER

625 Islanding St

(10) COLOR OR RACE

Colored

(11) AGE AT LAST BIRTHDAY

28 (Years)

(12) BIRTHPLACE

Columbia S.C.

(13) OCCUPATION

Pumper

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

1... Two

(14) NAME BEFORE MARRIAGE

Essie Jones

(15) PRESENT POSTOFFICE OF MOTHER

625 Islanding St

(16) COLOR OR RACE

Colored

(17) AGE AT LAST BIRTHDAY

22 (Years)

(18) BIRTHPLACE

Oxford S.C.

(19) OCCUPATION

Laundry work

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

Two

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 10 P M., on the date above stated. (Hour A. M. or P. M.)

(23) (Signature)

M. A. Pratt

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

midwife 1813 Pulaski

Given name added from a supplemental report

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Registrar

(26) Witness

J. Small

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

(27) Filed Dec 18, 1916

(28) W. H. ... 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.