

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.

RECAP OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Anderson  
Township of Centerville  
or  
Inc. Town of.....  
or  
City of.....

(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

40814

Registration District No. 303 Registered No. 82  
(For use of Local Registrar)

(2) Full Name of Child

William Earl Rice

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

(3) BOY OR GIRL Boy (4) Twin or Triplet? ✓ (5) Number in order of birth ✓ (6) Are Parents Married? yes (7) DATE OF BIRTH Dec 23 1922  
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Mike Rice  
(9) PRESENT POSTOFFICE OF FATHER Anderson S.C. R.F.D. 2  
(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 31  
(Years)  
(12) BIRTHPLACE Anderson S.C.  
(13) OCCUPATION Iron laborer

(20) Number of children born to mother, including present birth 3

MOTHER.

(14) NAME BEFORE MARRIAGE Sula Cobb  
(15) PRESENT POSTOFFICE OF MOTHER Anderson S.C. #2  
(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 28  
(Years)  
(18) BIRTHPLACE Anderson S.C.  
(19) OCCUPATION Domestic

(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 born alive at 9:05 A.M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) A. C. Pruitt

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

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

(27) Filed JAN 10 1923 (28) The Registrar 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.

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Form No. 6