

(1) PLACE OF BIRTH

County of CharlottesvilleTownship of Cannobello

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

70346

Registration District No. 40-CRegistered No. 130

(For use of Local Registrar)

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

(2) Full Name of Child Thomas Jefferson Titts

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 /

To be answered only in event of Twins or Triplets

(6) Are
Parents
Married? yes(7) DATE OF
BIRTH June 19, 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL
NAME T B Titts(9) PRESENT
POSTOFFICE
OF FATHER Cannobello RFD(10) COLOR
OR
RACE white(11) AGE AT LAST
BIRTHDAY 45
(Years)

(12) BIRTHPLACE

State of Georgia

(13) OCCUPATION

Farmer(20) Number of children born to
mother, including present birth { 1 }

MOTHER.

(14) NAME BEFORE
MARRIAGE M B Canteberry(15) PRESENT
POSTOFFICE
OF MOTHER Cannobello RFD(16) COLOR
OR
RACE white(17) AGE AT LAST
BIRTHDAY 37
(Years)

(18) BIRTHPLACE

Georgia

(19) OCCUPATION

House work(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 6 A.M.
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) R. E. Thompson

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

PhysicianGiven name added from a supplement
report

(26) Witness

(Signature of Witness necessary only
when question 23 is signed by mark)(27) Filed July 26, 1916(28) E. L. Cyers
Local RegistrarWhen 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.

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 (2)

FIRST BORN, NO. 1, THE OTHER, NO. 2, etc., in question 1.

McCaw, of Columbia