

Form No. 8

(1) PLACE OF BIRTH

County of BeaufortTownship of Blufftonor
Inc. Town of _____or
(City of _____)

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

(2) Full Name of Child Thomas Barnwell

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

Registration District No. 601Registered No. 36

(For use of Local Registrar)

FILE NO. For State Registrar Only

23421

(3) BOY OR GIRL Boy

(4) Twin or Triplet?

To be answered only in event of Twins or Triplets

(5) Number in order of birth

(6) Age Parents Married Yes(7) DATE OF BIRTH Jan 15 1932
(Name of Month) (Day) (Year)

FATHER

(8) FULL NAME John Barnwell(9) PRESENT POSTOFFICE OF FATHER Bluffton, SC(10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 34 (Years)(12) BIRTHPLACE Beaufort County SC(13) OCCUPATION Farming(14) Number of children born to mother, including present birth 1

MOTHER

(14) NAME BEFORE MARRIAGE Elizabeth Brown(15) PRESENT POSTOFFICE OF MOTHER Bluffton, SC(16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 38 (Years)(18) BIRTHPLACE Beaufort County SC(19) OCCUPATION Housewife(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 born alive at 6 P.M.
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Thomas Brown (25) Address of Physician or Midwife Bluffton, SC(24) State whether Physician or Midwife Midwife

Give name added from a supplemental report

(26) Witness

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

(27) Filed Aug 15 1932 (28) W. J. Smith
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 28th month of pregnancy.

MARRIAGE RECORDS FOR MINORS.
WRITE PLAINLY, WITH UNFADING INK. THIS IS A PERMANENT RECORD.
S. 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 1.