

## (1) PLACE OF BIRTH

County of FlorenceTownship of Effingham

or

Loc. Town of

City of

(If birth occurs in a hospital or other institution, give name of \_\_\_\_\_ St.; \_\_\_\_\_ Ward)

(2) Full Name of Child Jacqueline Cole Thomas 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?

(7) DATE OF BIRTH

March, 21, 1916  
(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME

Byron Cole Thomas

(9) PRESENT POSTOFFICE OF FATHER

Effingham

(10) COLOR OR RACE

White(11) AGE AT LAST BIRTHDAY 46  
(Years)

(12) BIRTHPLACE

Florence County

(13) OCCUPATION

harning

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

10

## MOTHER.

(14) NAME BEFORE MARRIAGE

Minnie Mariah McElroy

(15) PRESENT POSTOFFICE OF MOTHER

Effingham SC

(16) COLOR OR RACE

White(17) AGE AT LAST BIRTHDAY 41  
(Years)

(18) BIRTHPLACE

Florence County SC

(19) OCCUPATION

House Keeping

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

9

## 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) Dr. Frank Kelly(24) State whether Physician or midwife (25) Address of Physician or midwifePhysicianLowards SC

Given name added from a supplemental report

Sept 10, 1916Effingham

Registrar

(26) Witness

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

(27) Filed Sept 1 1916

(28)

D. C. Nee

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.

fifth month of pregnancy.

1. In case of TWINS OR TRIPLETS use a SUPPLEMENTAL REPORT for each child, and attach the  
 FIRST-ROUN, No. 1, with OTHER, No. 2, etc., in question 3.  
 2. In case of TWINS OR TRIPLETS use a SUPPLEMENTAL REPORT for each child, and attach the  
 FIRST-ROUN, No. 1, with OTHER, No. 2, etc., in question 3.  
 3. In case of TWINS OR TRIPLETS use a SUPPLEMENTAL REPORT for each child, and attach the  
 FIRST-ROUN, No. 1, with OTHER, No. 2, etc., in question 3.