

(1) PLACE OF BIRTH

County of UnionTownship of Dogansville

Inc. Town of

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

79578

Registration District No. 4201 Registered No. 34

(For use of Local Registrar)

(2) Full Name of Child Mary Elizabeth Thompson

If child is not renamed, make supplemental report as directed

(3) BOY OR GIRL?

(4) Twin or triplet?

Is he assumed only in case of twins or triplets?

(5) Number in order of birth

(6) Are Parents Married?

(7) DATE OF BIRTH

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Alfred Thompson

(9) PRESENT POSTOFFICE OF FATHER

Union Co.

(10) COLOR OR RACE

Colored

(11) AGE AT LAST BIRTHDAY

27 (Years)

(12) BIRTHPLACE

Union County

(13) OCCUPATION

Farmer

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

1

MOTHER.

(14) NAME BEFORE MARRIAGE

Miss Belle Henderson

(15) PRESENT POSTOFFICE OF MOTHER

Union Co.

(16) COLOR OR RACE

Colored

(17) AGE AT LAST BIRTHDAY

22 (Years)

(18) BIRTHPLACE

Union County

(19) OCCUPATION

Kalover

(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 17 M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) A. P. McElroy

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report.

191...

Registrar

(26) Witness

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

(27) Filed Sept 17 1916(28) 1916(29) J. Bay & Laundry

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.

*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.

NOTE: 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.

W.B. McCaw, Jr., Registrar