

Form No. 1

## (1) PLACE OF BIRTH

County of Richland CoTownship of W. P. R.Inc. Town of Columbia

City of .....

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA  
Bureau of Vital Statistics  
State Board of HealthFile No. — For State Registrar Only  
**30014**Registration District No. 38049 Registered No. 48

(For use of Local Registrar)

(No. Windsor Road St.; ..... Ward)

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

(2) Full Name of Child Elizette Thompson

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

3) BOY OR GIRL <u>girl</u>	4) Twin or Triplet? <u>one</u> To be answered only in event of Twin or Triplet	5) Number in order of birth <u>9</u>	6) Are Parents Married? <u>yes</u>	7) DATE OF BIRTH <u>Sept 13, 1923</u> (Name of Month) (Day) (Year)
-------------------------------	---	---	---------------------------------------	--

## FATHER.

8) FULL NAME Phillip Thompson9) PRESENT POSTOFFICE OF FATHER Columbia, S.C.10) COLOR OR RACE color (11) AGE AT LAST BIRTHDAY 40  
(Years)12) BIRTHPLACE Fairfield Co

13) OCCUPATION

labor20) Number of children born to mother, including present birth 9

## MOTHER.

14) NAME BEFORE MARRIAGE Rebecca Richson15) PRESENT POSTOFFICE OF MOTHER Columbia, S.C.16) COLOR OR RACE color (17) AGE AT LAST BIRTHDAY 35  
(Years)18) BIRTHPLACE Fairfield Co

19) OCCUPATION

House Keeping21) Number of children of this mother now living, including present birth 8

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

22) I hereby certify that I attended the birth of this child, who was alive at 5:30 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Elizette Mathis

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Ridge Road1241 1st St

Given name added from a supplemental report

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

(27) Filed 1923 L. M. Taylor 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.