

16 092975

MARGIN RESERVED FOR BINDING

WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD

N. B.—In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each, in order of birth, stated.

1. PLACE OF BIRTH

County of Anderson
 Township of Pendleton
 or
 Inc. Town of _____
 or
 City of Pendleton, S.C.

Standard Certificate of Birth

STATE OF SOUTH CAROLINA

FILE No.—For State Registrar Only

00246

Registration District No. 310 Registered No. 137
 (For use of Local Registrar)

(No. _____ 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 Thomas Green Watkins, Jr. { If child is not yet named, make supplemental report as directed.

3. Boy or Girl Boy If Plural Births _____ 4. Twin, triplet or other _____ 6. Premature _____ 7. Are Parents _____ 8. Date of birth Nov. 25, 1916
 5. Number, in order of birth _____ Full term _____ Married? Yes (Month, day, year)

9. Full name of FATHER Thomas Green Watkins

18. Name before marriage of MOTHER Bessie Hunter

10. Residence (mailing address) (If non-resident, give place and State) Pendleton, S.C.

19. Residence (mailing address) (If non-resident, give place and State) Pendleton

11. Color or race White 12. Age at child's birth 31 (years)

20. Color or race White 21. Age at child's birth 30 (years)

13. Birthplace (city or place) (State or country) Pendleton, S.C.

22. Birthplace (city or place) (State or country) Pendleton, S.C.

14. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc. Clerk

23. Trade, profession, or particular kind of work done, as house-keeper, typist, nurse, clerk, etc. housewife

15. Industry or business in which work was done, as sawmill, bank, etc. Gen. Malse Store

24. Industry or business in which work was done, as own home, lawyer's office, silk mill, etc. own home

16. Date (month and year) last engaged in this work to date 17. Total time (years) spent in this work _____

25. Date (month and year) last engaged in this work Nov. 23 1916 26. Total time (years) spent in this work _____

27. Number of children of this mother (At time of birth and including this child) (a) Born alive and now living ONE (b) Born alive but now dead None (c) Stillborn None

28. If stillborn, period of gestation No (months) _____ (weeks) _____ 29. Cause of stillbirth _____ Before labor _____ During labor _____

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify to the birth of this child, who was Born Alive at 11:30 P m. on the date above stated.
 (Born alive or stillborn)

{ When there was no attending physician or midwife, then the father, householder, etc., should make this return.

(Signed) Bessie H. Watkins, Parent

Given name added from a supplementary report _____ (Date of) _____

or _____, Guardian

Address Pendleton, S.C.

Filed Dec 27, 1916 J. L. Watkins Registrar.

Registrar.