

WHITE PLAINLY, WITH UNFADING INC—WHEN IN A PRELIMINARY REPORT.
N. 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 8
MAY OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Orangeburg
Township of Madison
OR
Inc. Town of
OR
City of

CERTIFICATE OF BIRTH
STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of Health

File No.—For State Registrar Only
16319

Registration District No. 3670 Registered No. 42
(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 Maria Hampton

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

(3) BOY OR GIRL Girl (4) Twin or Triplet? No (5) Number in order of birth 4 (6) Are Parents Married? Yes (7) DATE OF BIRTH May 21, 1922
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Addie Thompson
(9) PRESENT POSTOFFICE OF FATHER City S. C.
(10) COLOR OR RACE col (11) AGE AT LAST BIRTHDAY 30
(Years)
(12) BIRTHPLACE City Co. S. C.
(13) OCCUPATION Farming

MOTHER.

(14) NAME BEFORE MARRIAGE Louisa Thomas
(15) PRESENT POSTOFFICE OF MOTHER City S. C.
(16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 29
(Years)
(18) BIRTHPLACE City Co. S. C.
(19) OCCUPATION House work

(20) Number of children born to mother, including present birth 9 (21) 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 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Mrs. W. B. W. B. W.
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife City S. C.

Given name added from a supplemental report

(26) Witness W. B. W.
(Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed June 1, 1922 (28) W. B. W.
Registrar 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.