

MARGIN RESERVED FOR BINDING.  
WHITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD  
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 5.

REGISTRY OF COLUMBIA, COLUMBIA, S. C.

## (1) PLACE OF BIRTH

County of FlourenceTownship of Immenseville

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

38367

Registration District No. 2-0-15 Registered No. 86

(For use of Local Registrar)

(2) Full Name of Child Nedama Thompson

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

(3) BOY OR 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 April 2, 1922  
(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME

Otto Thompson

(9) PRESENT POSTOFFICE OF FATHER

Immenseville

(10) COLOR OR RACE

Col.(11) AGE AT LAST BIRTHDAY 24  
(Years)

(12) BIRTHPLACE

Flourence Co.

(13) OCCUPATION

Salvager

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

1

## MOTHER.

(14) NAME BEFORE MARRIAGE

Rosie Brook

(15) PRESENT POSTOFFICE OF MOTHER

Immenseville

(16) COLOR OR RACE

Col.(17) AGE AT LAST BIRTHDAY 26  
(Years)

(18) BIRTHPLACE

Flourence Co.

(19) OCCUPATION

Domestic

(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 St. M.  
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Sarah Davis

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Midwife

Given name added from a supplemental report

(26) Witness .....  
(Signature of Witness necessary only when question 23 is signed by mark)(27) Filed Nov. 20, 1922 (28) R. G. Nelson  
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.