

1. N. H.—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.

(1) PLACE OF BIRTH

County of Lancaster
Township of Can Creek
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
30909

Registration District No. 2801

Registered No. 351
(For use of Local Registrar)

(2) Full Name of Child Willie Thompson

(3) BOY OR GIRL Boy

(4) Twin or Triplet? 1

(5) Number in order of birth 4
To be answered only in event of Twins or Triplets

(6) Are Parents Married? yes

(7) DATE OF BIRTH 9/26/22
(Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME Oates Thompson
(9) PRESENT POSTOFFICE OF FATHER Lancaster
(10) COLOR OR RACE Cal
(11) AGE AT LAST BIRTHDAY 24
(12) BIRTHPLACE Lancaster, S.C.
(13) OCCUPATION Farming

MOTHER.
(14) NAME BEFORE MARRIAGE Breen Thompson
(15) PRESENT POSTOFFICE OF MOTHER Lancaster
(16) COLOR OR RACE Cal
(17) AGE AT LAST BIRTHDAY 24
(18) BIRTHPLACE Lancaster, S.C.
(19) OCCUPATION Farming

(20) Number of children born to mother, including present birth 14

(21) Number of children of this mother now living, including present birth 14

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was... born Sept 26, 1922, at 2:00 P.M.
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Nan Page

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Midwife

Given name added from a supplemental report

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

(27) Filed Oct. 8, 1922 (28) W. H. Duffin
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.

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