

FORM NO. 1.

(1) PLACE OF BIRTH

County of GeorgetownTownship of 1505or
Inc. Town ofor
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

42901

Registration District No. 2604 Registered No. 71

(For use of Local Registrar)

(2) Full Name of Child Ellen Thuman St. 1 Ward 1

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

(6) Are Parents Married?

(7) DATE OF BIRTH Aug 30
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Willie Thuman(9) PRESENT POSTOFFICE OF FATHER Plantersville Sc(10) COLOR OR RACE Thuman (11) AGE AT LAST BIRTHDAY 20 (Years)(12) BIRTHPLACE Georgetown(13) OCCUPATION Wool Worker(14) Number of children born to mother, including present birth 226

MOTHER.

(14) NAME BEFORE MARRIAGE Anna Brown(15) PRESENT POSTOFFICE OF MOTHER LaBree Springs(16) COLOR OR RACE Thuman (17) AGE AT LAST BIRTHDAY 26 (Years)(18) BIRTHPLACE Georgetown(19) OCCUPATION Cook(21) Number of children of this mother now living, including present birth Two

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(22) I hereby certify that I attended the birth of this child, who was born alive at LaBree Springs on the date above stated. (Hour A. M. or P. M.)(23) (Signature) Anna Thuman(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife LaBree Springs Sc

Given name added from a supplemental report

(26) Witness Maud Bullock
(Signature of Witness necessary only when question 23 is signed by mark)(27) Filed Jan 11 1915 (28) E. L. Egan
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.

MARGIN RESERVED FOR BINDING.

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.

McAW, of Columbia