

WRITE 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.
McGaw. of Columbia.

(1) PLACE OF BIRTH
County of Charleston

Township of

or
Inc. Town of

or
City of Charleston (No. 81 Beaufort 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 Thaddeus Bolger III

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

(3) BOY OR GIRL? Boy

(4) Twin or Triplet? —

(5) Number in order of birth —

To be answered only in case of Twins or Triplets

(6) Are Parents Married? Yes

(7) DATE OF BIRTH Nov. 2, 1916

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Thomas Thaddeus Bolger Jr

(9) PRESENT POSTOFFICE OF FATHER Charleston SC

(10) COLOR OR RACE White

(11) AGE AT LAST BIRTHDAY 27 (Years)

(12) BIRTHPLACE Charleston SC

(13) OCCUPATION Salesman

(20) Number of children born to mother including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Marie Lee Burns

(15) PRESENT POSTOFFICE OF MOTHER Charleston SC

(16) COLOR OR RACE White

(17) AGE AT LAST BIRTHDAY 20 (Years)

(18) BIRTHPLACE Summerville SC

(19) OCCUPATION None

(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 Born alive at 630 A. M., on the date above stated. (Hour A. M. or P. M.)

(23) (Signature) J. M. Green, M.D.

(24) State whether Physician or Midwife Physician

(25) Address of Physician or Midwife 277 Calhoun St

Given name added from a supplemental report

....., 191.....

Registrar

(26) Witness

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

(27) Filed 11/13/16 191.....

(28) J. M. Green, M.D. 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.

a supplemental report (Date of)

Registrar.

Filed 11/13/16, 19
Cor. 2/2/39

J. M. Green, M.D.
Leon Benov, M.D. Registrar
Reg.

File No.—For State Registrar Only
84628

Registered No. 12 47
(For use of Local Registrar)