

(1) PLACE OF BIRTH

County of Greenwood

Township of

or Town of

or 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

4131

Registration District No 23.0.6Registered No. 28

(For use of Local Registrar)

(2) Full Name of Child Marion Thompson

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

(3) BOY OR GIRL Boy (4) Twin or Triplet No (5) Number in order of birth 1 (6) Are Parents Married? No (7) DATE OF BIRTH February 12, 1923
 To be answered only in case of Twin or Triplet (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Paulas Thompson(9) PRESENT POSTOFFICE OF FATHER Greenwood R. 3(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 22 (Year)

(12) BIRTHPLACE

(13) OCCUPATION Farming(14) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Lillie D. Campbell(15) PRESENT POSTOFFICE OF MOTHER Greenwood R. 6(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 15 (Year)(18) BIRTHPLACE Win. to. Soc., S.C.(19) OCCUPATION Farming(20) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(21) I hereby certify that I attended the birth of this child, who was Alive at P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(22) (Signature) Blairus... (23) Address of Physician or Midwife Greenwood R. 6(24) State whether Physician or Midwife Midwife

Given name added from a supplemental report

(25) Witness Tillie Ross (Signature of Witness necessary only when question 21 is signed by mark)(26) File March 23 (27) A. P. Brooks Local Registrar

When there is an attending physician or midwife, then the father, householder, etc., should make this return. If a child is born even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.

WRITE PLAINLY. WITH ENVELOPE. THIS IS A PERMANENT RECORD. 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 3.