

VERTICALLY, 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.

(1) PLACE OF BIRTH

County of Sumter
 Township of Providence
 or
 Inc. Town of
 or
 City of (No. St.; Ward)
 (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

83661

Registration District No. 410.8 Registered No. 130
 (For use of Local Registrar)

(2) Full Name of Child Thomas Spencer Jr If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Boy (4) Twin or Triplet? Yes (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Oct 2, 1916
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Thomas Spencer sr
 (9) PRESENT POSTOFFICE OF FATHER Sumter S.C.
 (10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 44 (Years)
 (12) BIRTHPLACE S.C.
 (13) OCCUPATION Farmer

MOTHER.

(14) NAME BEFORE MARRIAGE Eliza Anderson
 (15) PRESENT POSTOFFICE OF MOTHER Sumter S.C.
 (16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 36 (Years)
 (18) BIRTHPLACE S.C.
 (19) OCCUPATION Domestic

(20) Number of children born to mother, including present birth 14 (21) Number of children of this mother now living, including present birth 6

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Alive at 7:20 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Eddie Mark Anderson
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Salzell S.C.

Given name added from a supplemental report

(26) Witness Mrs. Eva Barrett
 (Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed 10-16 1916 (28) B. McLaughlin
 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 ninth month of pregnancy.