

MARGIN RESERVED FOR BINDING.
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.

(1) PLACE OF BIRTH

County of Calhoun
Township of Surfong
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

80461

Registration District No. 802

Registered No. 134
(For use of Local Registrar)

(No.)

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

Margeline Thomas

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

(3) BOY OR GIRL
Girl

(4) Twin or Triplet?

(5) Number in order of birth

(6) Are Parents Married
Yes

(7) DATE OF BIRTH
Oct 12 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME
John Thomas

(9) PRESENT POSTOFFICE OF FATHER
St. Matthews, S.C.

(10) COLOR OR RACE
Negro

(11) AGE AT LAST BIRTHDAY
21
(Years)

(12) BIRTHPLACE
Calhoun Co

(13) OCCUPATION
Farm Hand

(20) Number of children born to mother, including present birth
3

MOTHER.

(14) NAME BEFORE MARRIAGE
Rosa

(15) PRESENT POSTOFFICE OF MOTHER
St. Matthews, S.C.

(16) COLOR OR RACE
Negro

(17) AGE AT LAST BIRTHDAY
25
(Years)

(18) BIRTHPLACE
Durham Co

(19) OCCUPATION
Housewife

(21) Number of children of this mother now living, including present birth
2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Born alive at 8 A.M.
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Heavie Souter

(24) State whether Physician or Midwife
midwife

(25) Address of Physician or Midwife
St. Matthews, S.C.

Given name added from a supplemental report

(26) Witness

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

(27) Filed

Oct 30 1916

(28)

W. S. Keller
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.