

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.

Form No. 1
N. B. McCaw, of Columbia, S. C.

(1) PLACE OF BIRTH
County of Shartlandburg
Township of Wichcraft
or
Inc. Town of
or
City of
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)
Registration District No. 4003 Registered No. 26
(For use of Local Registrar)
St.; Ward

CERTIFICATE OF BIRTH
STATE OF SOUTH CAROLINA.
Bureau of Vital Statistics
State Board of Health

File No. — For State Registrar Only
57627

(2) Full Name of Child Guy Eugene Thompson
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 (6) Are Parents Married? yes (7) DATE OF BIRTH Apr. 13, 1916
(Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME Claude C Thompson
(9) PRESENT POSTOFFICE OF FATHER Cumoree S.C. P.O.
(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 34 (Years)
(12) BIRTHPLACE Shartlandburg Co.
(13) OCCUPATION Farmer
(20) Number of children born to mother, including present birth 5

MOTHER.
(14) NAME BEFORE MARRIAGE Lillie Phillip
(15) PRESENT POSTOFFICE OF MOTHER Cumoree S.C. P.O.
(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 30 (Years)
(18) BIRTHPLACE Shartlandburg Co.
(19) OCCUPATION Domestic
(21) Number of children of this mother now living, including present birth 5

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*
(22) I hereby certify that I attended the birth of this child, who was alive at 6 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)
(23) (Signature) C. J. Hanna
(24) State whether Physician or Midwife (25) Address of Physician or Midwife
Physician Cumoree S.C.
(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed Apr. 14, 1916 (28) C. J. Hanna Local Registrar
Given name added from a supplemental report
Not 3 1916
C. W. Miller 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.
Super 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.
LOCAL REGISTRAR