

MARGIN RESERVED FOR BINDING.

WRITE PLAINLY, WITH UNFADING INK—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 6.

McGraw-Hill, Columbia, S. C.

(1) PLACE OF BIRTH

County of Lee
Township of Turkey Creek
or
Inc. Town of Lucknow
or
City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of Health

File No.—For State Registrar Only

31115

Registration District No. 300.9 Registered No. 49
(For use of Local Registrar)

City of (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 Pearl Lee Thomas If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL G (4) Twin or Triplet? No (5) Number in order of birth one (6) Are Parents Married? yes (7) DATE OF BIRTH Sept 28 22
(Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME Emmie Thomas
(9) PRESENT POSTOFFICE OF FATHER Lucknow S.C.
(10) COLOR OR RACE Col (11) AGE AT LAST BIRTHDAY 27
(Year)
(12) BIRTHPLACE S.C. H. V. S.
(13) OCCUPATION Farmer
(20) Number of children born to mother, including present birth Three

MOTHER.
(14) NAME BEFORE MARRIAGE Lillian Thomas
(15) PRESENT POSTOFFICE OF MOTHER Lucknow S.C.
(16) COLOR OR RACE Col (17) AGE AT LAST BIRTHDAY 22
(Year)
(18) BIRTHPLACE S.C. H. V. S.
(19) OCCUPATION Domestic
(21) Number of children of this mother now living, including present birth Three

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 1 P. M. on the date above stated.
(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Phyllis Bilton
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Lucknow S.C.

Given name added from a supplemental report
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..... 19

(26) Witness
(Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed Oct 10 22 (28) G. Rodgers
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.