

MARGIN RESERVED FOR BINDING.

WHITE 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 make the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

RECAP OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH
County of Laurens
Township of Laurens
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
35257

Registration District No. 7904 Registered No. 730
(For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

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

(3) ~~BOY OR GIRL~~ (4) Twin or Triplet? ☒ (5) Number in order of birth 5 (6) Are Parents Married? Yes (7) DATE OF BIRTH Oct 3 1922
(Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME William Harry Thomas
(9) PRESENT POSTOFFICE OF FATHER Father dead
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 40 (Years)
(12) BIRTHPLACE Greenville Co
(13) OCCUPATION was farmer
(20) Number of children born to mother, including present birth 5

MOTHER.
(14) NAME BEFORE MARRIAGE Sallie Cathen McCas
(15) PRESENT POSTOFFICE OF MOTHER Laurens 5
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 42 (Years)
(18) BIRTHPLACE Laurens 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 Sara Catherine Thomas at 3 P.M. on the date above stated.
(23) (Signature) A. Christopher M.H.
(24) State whether Physician or Midwife (25) Address of Physician or Midwife Laurens

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

(26) Witness
(Signature of Witness necessary only when question 23 is signed)
(27) Oct 7 1922 (28) L. C. Thomas 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.