

MARGIN RESERVED FOR FILING.
 WHEN PLAINLY APPEARING, SUCH MARGINAL RECORD
 IN CASE OF TWIN OR TRIPLETS USE A SEPARATE INSTEAD OF CHILD, AND ADD, the
 FIRST-BORN, No. 1. THIS OTHER, No. 2, etc. in question 8.
 MICHIGAN COLUMBIAN, COLUMBUS, O.

(1) PLACE OF BIRTH

County of Saluda
 Township of No. 6
 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
2426

Registration District No. 39.05 Registered No. 5
 (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 Thomas B. Scurry

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

3. BOY OR GIRL? <u>boy</u>	4. Twin or Triplet? <u>No</u>	5. Number in order of birth <u>1</u>	6. Are Parents Married? <u>yes</u>	7. DATE OF BIRTH <u>Jan. 27, 1922</u> (Name of Month) (Day) (Year)
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FATHER.

8. FULL NAME Leimore Scurry

9. PRESENT POSTOFFICE OF FATHER Saluda S.C.

10. COLOR OR RACE colored 11. AGE AT LAST BIRTHDAY 43 (Years)

12. BIRTHPLACE S. C.

13. OCCUPATION Farming

20. Number of children born to mother, including present birth 12

MOTHER.

14. NAME BEFORE MARRIAGE Lurina Jones

15. PRESENT POSTOFFICE OF MOTHER Saluda S.C.

16. COLOR OR RACE colored 17. AGE AT LAST BIRTHDAY 35 (Years)

18. BIRTHPLACE S. C.

19. OCCUPATION House wife

21. Number of children of this mother now living, including present birth 12

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) Lela Abney
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Saluda, S.C.

Given name added from a supplemental report

(26) Witness _____
 (Signature of Witness necessary only when question 23 is signed by mark)
 (27) Filed Feb 10 19 22 (28) A. W. Kora 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.