

(1) PLACE OF BIRTH

County of Union
 Township of Buffalo
 or
 Inc. Town of Buffalo
 or
 City of

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

93867

Registration District No. 42BRegistered No. 18
(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 Celine Thompson If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Girl (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Sex Female (7) DATE OF BIRTH March 22 22
 To be answered only in event of Twin or Triplet (Name of Month) (Day) (Year)

FATHER

(8) FULL NAME Dan Thompson
 (9) PRESENT POSTOFFICE OF FATHER Buffalo S.C.
 (10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 25 (Years)
 (12) BIRTHPLACE Union S.C.
 (13) OCCUPATION Farmer
 (20) Number of children born to mother, including present birth Three

MOTHER

(14) NAME BEFORE MARRIAGE Amanda Robinson
 (15) PRESENT POSTOFFICE OF MOTHER Buffalo S.C.
 (16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 22 (Years)
 (18) BIRTHPLACE Union Co.
 (19) OCCUPATION Farmer
 (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 Ban. Cline at 12 M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Lelia Earnest

(24) State whether: Physician or Midwife

(25) Address of Physician or Midwife

midwife Buffalo 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 March 22 22

(28)

Local Registrar

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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.

FIRST-BORN, NO. 1. THE OTHER, NO. 2, etc., in generation &
 RECORD OF COLUMBIA, COLUMBIA, S. C.