

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.

(1) PLACE OF BIRTH

County of Charleston  
Township of Lincoln  
or  
Inc. Town of .....  
or  
City of Gaffney S.C.

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

File No. — For State Registrar Only

41455

Registration District No. 10A Registered No. 270  
(For use of Local Registrar)  
(No. 815 Holmes ex St.; 4 Ward)  
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child

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 (6) Are Parents Married? yes (7) DATE OF BIRTH Dec 18 1932  
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Thomas Ernest Petty  
(9) PRESENT POSTOFFICE OF FATHER Gaffney S.C.  
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 43 (Years)  
(12) BIRTHPLACE Gaffney S.C.  
(13) OCCUPATION Carpenter  
(20) Number of children born to mother, including present birth 5

MOTHER.

(14) NAME BEFORE MARRIAGE Mamie Douglas Logis  
(15) PRESENT POSTOFFICE OF MOTHER Gaffney S.C.  
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 27 (Years)  
(18) BIRTHPLACE Charleston S.C.  
(19) OCCUPATION Housewife  
(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 born at 4 P.M. on the date above stated.  
(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. S. Smith

(24) State whether Physician or Midwife Midwife

(25) Address of Physician or Midwife Gaffney 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 Jan 10 1933 (28) J. S. Smith 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.

\*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.