

McCauley, Walter, Cat, Ading, 1916 - THIS IS A PERMANENT RECORD.

N. B.—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.

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(1) PLACE OF BIRTH
County of York
Township of Catawba
or
Inc. Town of
or
City of
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

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

File No.—For State Registrar
75244

Registration District No. 4404 Registered No. 127
(For use of Local Registrar)

(2) Full Name of Child Thimma Thompson { If child is not yet named, a supplemental report as directed.

(3) BOY OR GIRL? Boy (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? yes (7) DATE OF BIRTH Aug. 20
To be answered only in event of Twins or Triplets. (Name of Month) (Day)

FATHER.
(8) FULL NAME Jim Thompson
(9) PRESENT POSTOFFICE OF FATHER Rock Hill, S.C.
(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 39 (Years)
(12) BIRTHPLACE S.C.
(13) OCCUPATION Iron Worker

MOTHER.
(14) NAME BEFORE MARRIAGE Maggie B
(15) PRESENT POSTOFFICE OF MOTHER Rock Hill, S.C.
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 2 (Years)
(18) BIRTHPLACE S.C.
(19) OCCUPATION Housewife

(20) Number of children born to mother, including present birth 3 (21) Number of children of this mother now living, including present birth 1

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 A.M. or P.M.)

(23) (Signature) (24) State whether Physician or Midwife (25) Address of Physician or Midwife maul

Given name added from a supplemental report
....., 191.....
..... Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed 9/8/16 (28) J. H. Mill Local Registrar

*When there was no attending physician or midwife, then the father, householder, etc., should make this return a child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before fifth month of pregnancy.