

Form No. 1.

(1) PLACE OF BIRTH

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

County of

Anderson

Bureau of Vital Statistics

State Board of Health

Township of

Cavanah

or

Inc. Town of

or

City of

Registration District No. 311

Registered No. 45

(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

Josephine Thrasher

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

8

(6) Age of Father

28

(7) DATE OF BIRTH

June 11, 1916

(Month) (Day) (Year)

(8) FULL NAME

Will Thrasher

(14) NAME BEFORE MARRIAGE

Mitchell

(9) PRESENT POSTOFFICE OF FATHER

Starrs Le

(15) PRESENT POSTOFFICE OF MOTHER

Star

(10) COLOR OR RACE

white

(11) AGE AT LAST BIRTHDAY

28 3/4

(16) COLOR OR RACE

white

(17) AGE AT LAST BIRTHDAY

29 1/4

(Years)

(12) BIRTHPLACE

Anderson S C

(18) BIRTHPLACE

Anderson S C

(13) OCCUPATION

Farmer

(19) OCCUPATION

Farmer

(20) Number of children born to mother, including present birth

8

(21) Number of children of this mother now living, including present birth

7

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

James A. Jones

(24) State whether Physician or Midwife

Given name added from a supplemental report

(26) Witness

Joe Jones

(27) Filed

June 11, 1916

(28)

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.

MARGIN RESERVED FOR INDEXING. WRITE 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 mark the FIRST-BORN, NO. 1. THE OTHER, NO. 2, etc., in question 5.

McClaw, of Columbia