

WHEN FORM NO. 10. MARGIN RESERVED FOR BINDING. WHITE PLAINLY, WITH CREASING INK. THIS IS A CARBON-IMPREGATED 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 3. McCaw, of Columbia.

(1) PLACE OF BIRTH

County of Montgomery

Township of 11

Inc. Town of 11

City of Montgomery

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

46180

Registration District No. 20-A Registered No. 676

(For use of Local Registrar)

(No. 779 St.; 111 Ward)

(2) Full Name of Child. Lorah Reese Thomas

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) Are Parents Married? No (7) DATE OF BIRTH Jan 3 1916 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Harry Reese

(9) PRESENT POSTOFFICE OF FATHER Sumter St.

(10) COLOR OR RACE Negro. (11) AGE AT LAST BIRTHDAY 45 (Years)

(12) BIRTHPLACE Florence Co.

(13) OCCUPATION Gas fitter

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

MOTHER.

(14) NAME BEFORE MARRIAGE Reese

(15) PRESENT POSTOFFICE OF MOTHER Sumter St.

(16) COLOR OR RACE Negro. (17) AGE AT LAST BIRTHDAY 11 (Years)

(18) BIRTHPLACE Florence Co.

(19) OCCUPATION Housewife

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

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) [Signature]

(24) State whether Physician or Midwife (25) Address of Physician or Midwife Sumter St.

Given name added from a supplemental report

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Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed Jan 3 1916 (28) C. C. Kraft M.D. 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.

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