

(1) PLACE OF BIRTH

County of Spartanburg
 Township of Campobello
 or
 Inc. Town of
 or
 City of

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

91802

Registration District No. 4001-a Registered No. 144
 (For use of Local Registrar)

City of (No. St.; 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? Girl (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Dec. 19, 1916
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME William Little
 (9) PRESENT POSTOFFICE OF FATHER Campobello SC
 (10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 30
 (Years)
 (12) BIRTHPLACE SC
 (13) OCCUPATION Farmer
 (20) Number of children born to mother, including present birth 7

MOTHER.

(14) NAME BEFORE MARRIAGE Mamie Nash
 (15) PRESENT POSTOFFICE OF MOTHER Campobello, SC
 (16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 37
 (Years)
 (18) BIRTHPLACE SC
 (19) OCCUPATION Domestic
 (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 alive at 11:30 a.m.
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Geo. E. Thompson, M.D.
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife Immature

Given name added from a supplemental report

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

(27) Filed (28) L. J. Maskey
 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.

FILED MONTH OF pregnancy

F E T Y A F I L M