

Form No. 1

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

File No.—For State Registrar Only

74693

(1) PLACE OF BIRTH

County of Spartanburg
Township of Campobello

or
Inc. Town of

Registration District No. H.O.C. Registered No. 141
(For use of Local Registrar)

or
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? Boy

(4) Twin or Triplet?

(5) Number in order of birth

(6) Are Parents Married? yes

(7) DATE OF BIRTH Aug 8 1916
(Name of Month) (Day) (Year)

To be answered only in event of Twins or Triplets

FATHER.

(8) FULL NAME

Ira Collins

(9) PRESENT POSTOFFICE OF FATHER

Campobello R 3

(10) COLOR OR RACE

white

(11) AGE AT LAST BIRTHDAY 39
(Years)

(12) BIRTHPLACE

W.C.

(13) OCCUPATION

Farmer

MOTHER.

(14) NAME BEFORE MARRIAGE

Lilly Thompson

(15) PRESENT POSTOFFICE OF MOTHER

Campobello R 3

(16) COLOR OR RACE

white

(17) AGE AT LAST BIRTHDAY 26
(Years)

(18) BIRTHPLACE

W.C.

(19) OCCUPATION

Housewife

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

2

(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 born alive at 8:20 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) E. G. Thompson

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife W.C.

Thompson

Given name added from a supplemental report

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

(27) Filed Aug 8 1916 (28) E. G. Thompson 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.