

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
 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.

(1) PLACE OF BIRTH

County of Pickens
 Township of Cherokee
 Inc. Town of

CERTIFICATE OF BIRTH

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

No. 4933—For State Registrar Only

Registration District No. 3200 Registered No. 16
 (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 Boy (4) Twin or Triplet To be answered only in case of Twins or Triplets (5) Number in order of birth (6) Are Parents Married Yes (7) DATE OF BIRTH Feb. 14, 1923
 (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME Central W. Thompson
 (9) PRESENT POSTOFFICE OF FATHER Central S.C.
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 27 (Years)
 (12) BIRTHPLACE Ga.
 (13) OCCUPATION Farmer
 (14) Number of children born to mother, including present birth 1

MOTHER.
 (14) NAME BEFORE MARRIAGE Sallie Crumshaw
 (15) PRESENT POSTOFFICE OF MOTHER Central S.C.
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 15 (Years)
 (18) BIRTHPLACE Ga.
 (19) OCCUPATION House keeper
 (20) Number of children of this mother now living, including present birth 0

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(21) I hereby certify that I attended the birth of this child, who was Alive at 12 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(22) (Signature) J. H. Anderson
 (23) State whether Physician or Midwife (24) Address of Physician or Midwife Central S.C.

Given name added from a householder's report

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

(26) Date Feb. 15, 1923 (27) J. H. Anderson Local Registrar.

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