# CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only
87351

(1) PLACE OF BIRTH

County of Spartanburg

Township of Campobello

or

Inc. Town of ..... Registration District No. 410-C Registered No. 200
(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? | (4) Twin or Triplet? | (5) Number in order of birth | (6) Are Parents Married? | (7) DATE OF BIRTH |
|---|---|---|---|---|
| Girl | | | Yes | Nov. 11, 1916 (Name of Month) (Day) (Year) |

To be answered only in event of Twins or Triplets

**FATHER.**

(8) FULL NAME: Lewis Arthur Barnett

(9) PRESENT POSTOFFICE OF FATHER: Gramling SC

(10) COLOR OR RACE: White (11) AGE AT LAST BIRTHDAY: 29 (Years)

(12) BIRTHPLACE: S. C.

(13) OCCUPATION: Sou. Ry Agent

(20) Number of children born to mother, including present birth: 2

**MOTHER.**

(14) NAME BEFORE MARRIAGE: Edna Isabel Mayfield

(15) PRESENT POSTOFFICE OF MOTHER: Gramling SC

(16) COLOR OR RACE: White (17) AGE AT LAST BIRTHDAY: 24 (Years)

(18) BIRTHPLACE: SC

(19) OCCUPATION: Housewife

(21) Number of children of this mother now living, including present birth: 2

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE***

(22) I hereby certify that I attended the birth of this child, who was born alive (Born alive or stillborn) at 12:30 a. M., (Hour A. M. or P. M.) on the date above stated.

(23) (Signature) Geo. Thompson MD

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife: Inman SC

Given name added from a supplemental report

....., 191....

..... Registrar

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

(27) Filed Nov. 12 1916 (28) E. A. Capers
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.

before the fifth month of pregnancy.

McCaw, Co., Columbia. LAW BLANKS, No. 1. THE OTHER, No. 2, etc., in question 5.