

FORM NO. 1.

(1) PLACE OF BIRTH

County of

Township of

or

Inc. Town of

or

City of

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

(2) Full Name of Child

John Thomas

File No.—For State Registrar Only

49742

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

Registration District No. 3004 Registered No. 1

(For use of Local Registrar)

St.; Ward

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

3

(6) Are Parents Married?

(7) DATE OF BIRTH

Jan 10 1904

To be answered only in event of Twins or Triplets

MOTHER.

(8) FULL NAME

Richard Thomas

(9) PRESENT POSTOFFICE OF FATHER

Belhath

(10) COLOR OR RACE

Dark

(11) AGE AT LAST BIRTHDAY

29 (Years)

(12) BIRTHPLACE

R.D. Cooper

(13) OCCUPATION

Farmer

(14) NAME BEFORE MARRIAGE

Martha Isaac

(15) PRESENT POSTOFFICE OF MOTHER

Belhath

(16) COLOR OR RACE

Dark

(17) AGE AT LAST BIRTHDAY

26 (Years)

(18) BIRTHPLACE

R.D. Cooper

(19) OCCUPATION

Farmer

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

Three

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

3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive, at 7:00 A.M. (Born alive or stillborn) (Hour A. M. or P. M.) on the date above stated.(23) (Signature) Margaret Rammis

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Midwife

Belhath

Given name added from a supplemental report

(26) Witness

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

(27) Filed

Jan 20 1904

(28)

M. Smith 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.

MARGIN RESERVED FOR BINDING. WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD. 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 5. McCaw, of Columbia.