

(1) PLACE OF BIRTH

County of Williamsburg
 Township of Harris
 Inc. Town of Williamsburg
 City of Williamsburg

CERTIFICATE OF BIRTH

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

File No. — For State Registrar Only
12322

Registration District No. 4301

Registered No. 98
 (For use of Local Registrar)

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

(2) Full Name of Child Louise Deane Thompson (If child 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 March 28, 1923
 (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME Wm. Deane Clarkson
 (9) PRESENT POSTOFFICE OF FATHER Frederick Co. S.C.
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 46 (Year)
 (12) BIRTHPLACE Williamsburg Co. S.C.
 (13) OCCUPATION Farmer
 (20) Number of children born to mother, including present birth 3

MOTHER.
 (14) NAME BEFORE MARRIAGE Sarah McKoon
 (15) PRESENT POSTOFFICE OF MOTHER Greenville S.C.
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 37 (Year)
 (18) BIRTHPLACE N.C.
 (19) OCCUPATION Housewife
 (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 born alive at 8 A.M. on the date above stated. (Born alive or stillborn. Hour A. M. or P. M.)

(23) (Signature) M. J. Morgan

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Greenville S.C.

Given name added from a supplemental report

(26) Witness

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

(27) Filed May 2, 1923

(28) J. H. Blackwell

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.