

## (1) PLACE OF BIRTH

County of D.C. Conee  
 Township of Windsor

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

50034

Inc. Town of ..... Registration District No. 3505 Registered No. 24  
 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 William H. T. C. Claiborne If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth 3 (6) Are Parents Married? Yes (7) DATE OF BIRTH 1, 13, 1916  
 (Name of Month) (Day) (Year)

FATHER.  
 (8) FULL NAME Geo. T. McClaine

(9) PRESENT POSTOFFICE OF FATHER Westminster

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 28 (Years)

(12) BIRTHPLACE Conee

(13) OCCUPATION Householder

(20) Number of children born to mother, including present birth 3

MOTHER.  
 (14) NAME BEFORE MARRIAGE Helen Wilson

(15) PRESENT POSTOFFICE OF MOTHER Westminster

(16) COLOR OR RACE Caucasian (17) AGE AT LAST BIRTHDAY 23 (Years)

(18) BIRTHPLACE Conee

(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 4:15 AM, on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) W. A. Shepherd

(24) State whether Physician or Midwife (25) (Address of Physician or Midwife) Westminster, S. C.

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 7-9-1916 (28) W. A. Shepherd 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.