

# CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only  
**63038**

(1) PLACE OF BIRTH

County of AndersonTownship of Houma Park

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.)

Registration District No. 301Registered No. 265

(For use of Local Registrar)

St.; ..... Ward;

(2) Full Name of Child. Carroll Ray Thomas

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? yes

(7) DATE

BIRTH June 5, 1916

(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Claude Courvoisier Thomas(9) PRESENT POSTOFFICE OF FATHER Houma Park S.C.(10) COLOR OR RACE white(11) AGE AT LAST BIRTHDAY 27

(Years)

(12) BIRTHPLACE Beeton, S.C.(13) OCCUPATION Farmer(20) Number of children born to mother, including present birth 2(14) NAME BEFORE MARRIAGE Louise Fields(15) PRESENT POSTOFFICE OF MOTHER Houma Park S.C.(16) COLOR OR RACE white(17) AGE AT LAST BIRTHDAY 24

(Years)

(18) BIRTHPLACE Beeton S.C.(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 alive at 11 A. M., (Born alive or stillborn) (Hour A. M. or P. M.) on the date above stated.(23) (Signature) W. C. Thomas(24) State whether Physician or Midwife (25) Address of Physician or Midwife Beeton S.C.

(26) Witness

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

(27) June 5, 1916

(28)

Local Registrar

Given name added from a supplemental report

191.....

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.

REMARKS: RECOVERED FROM HEMIPLEGIA.  
WHITE 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, THIS OFFICE, NO. 2, etc., in question 3.

McCaw, of Columbia