

(1) PLACE OF BIRTH

County of LaurensTownship of Laurens

or Town of

City of

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

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

File No.—For State Registrar Only
4798

Registration District No. 2904 Registered No. 19

(For use of Local Registrar)

(2) Full Name of Child Jessie Virginia Harmon If child is 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 Mar. 29 1921
 (Name of Month) (Day) (Year)

FATHER.		MOTHER.	
(8) FULL NAME <u>Walter Thomas</u>	(14) NAME BEFORE MARRIAGE <u>Gladie Bobb</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Watts Mill</u>	(16) COLOR OR RACE <u>White</u>
(9) PRESENT POSTOFFICE OF FATHER <u>Watts Mill</u>	(17) AGE AT LAST BIRTHDAY <u>35</u> (Years)	(18) BIRTHPLACE <u>Union C.</u>	(19) OCCUPATION <u>Domestic</u>
(10) COLOR OR RACE <u>White</u>	(20) BIRTHPLACE <u>Union C.</u>	(21) Number of children of this mother now living, including present birth <u>3</u>	
(11) AGE AT LAST BIRTHDAY <u>35</u> (Years)			
(12) BIRTHPLACE <u>Union C.</u>			
(13) OCCUPATION <u>Domestic</u>			
(22) Number of children born to mother, including present birth <u>3</u>			

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive or stillborn (Hour 3:40 A.M. or P.M.) on the date above stated.

(23) (Signature) Walter Thomas (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Laurens

Given name added from a supplemental report 191
 Registrar 191
 (26) Witness (Signature of Witness necessary only when question 23 is signed by mark) Walter Thomas
 (27) Filed Jul. 12 1921 (28) Local Registrar Walter Thomas

*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.

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