

(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.)

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

90299

Registration District No. 2401

Registered No. 287

(For use of Local Registrar)

(2) Full Name of Child Harold Ruthford Thomas

(If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL

Boy

(4) Twin or Triplet?

1

(5) Number in order of birth

6

(6) Are Parents Married?

Yes

(7) DATE OF BIRTH

Mar 12 1916

(Name of Month) (Day) (Year)

FATHER

(8) FULL NAME

Frank Thomas

(9) PRESENT POSTOFFICE OF FATHER

Hampton SC

(10) COLOR OR RACE

W

(11) AGE AT LAST BIRTHDAY

26

(Years)

(12) BIRTHPLACE

SC

(13) OCCUPATION

Farmer

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

Five

MOTHER

(14) NAME BEFORE MARRIAGE

Mrs. Elna Thomas

(15) PRESENT POSTOFFICE OF MOTHER

Hampton SC

(16) COLOR OR RACE

W

(17) AGE AT LAST BIRTHDAY

24

(Years)

(18) BIRTHPLACE

SC

(19) OCCUPATION

Housewife

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

Three

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 10:30 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

May 16, 1917C. W. Rogers, 19 Registrar

(26) Witness

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

(27) Filed

Jan 30 1916(28) J. W. Rogers

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.

Martin B. Woodward, M. D.

Assistant State Registrar

2/11/42

FIRST-BORN, No. 1. THE OTHER, No. 2, etc. In question 1.

RECEIVED OF COLUMBIA, COLUMBIA, S. C.