

MARGIN RESERVED FOR BINDING.
WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD, and mark the
N. H.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the
FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 6.

(1) PLACE OF BIRTH

County of Greenville
Township of Butler
or
Inc. Town of Greenville
or
City of Greenville
(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

77224

Registration District No. 2202 Registered No. 64
(For use of Local Registrar)

(No. A 7 19 8 Box 33 St.; Ward)
(If child is not yet named, make supplemental report as directed)

(2) Full Name of Child Charlie Berest Thomas

(3) BOY OR GIRL? Boy (4) Twin or Triplet? 1 (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Aug 15 1912
(Name of Month) (Day) (Year)

FATHER. (8) FULL NAME Charlie Thomas (9) PRESENT POSTOFFICE OF FATHER Greenville (10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY (Years) (12) BIRTHPLACE Farming (13) OCCUPATION
MOTHER. (14) NAME BEFORE MARRIAGE Wm. Williams (15) PRESENT POSTOFFICE OF MOTHER Greenville (16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY (Years) (18) BIRTHPLACE (19) OCCUPATION
(20) Number of children born to mother, including present birth 13 (21) Number of children of this mother now living, including present birth 13

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was... born alive... at 11:30 A.M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Midwife Charity Means (24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

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

(27) Filed Oct 10 1916 (28) W. White 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.

McGAW OF COLUMBIA, COLUMBIA, S. C.

A K S A F E T Y A F