

MARGIN RESERVED FOR BINDING.

WRITE 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. THE OTHER, No. 2, etc., in question 5.

MCCARTHY OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of CharlestonTownship of Sullivan's Islandor
Inc. 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

14083

Registration District No. 912 Registered No. 8
(For use of Local Registrar)(2) Full Name of Child Thomas Eugene If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? <u>Boy</u>	(4) Twin or Triplet? <u>To be answered only in case of Twins or Triplets</u>	(5) Number in order of birth	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>May 4, 1922</u> (Name of Month) (Day) (Year)
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FATHER

(8) FULL NAME Fred H. Eugene(9) PRESENT POSTOFFICE OF FATHER Moultrieville SC(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 30 (Years)(12) BIRTHPLACE Capers Island(13) OCCUPATION Boatman(20) Number of children born to mother, including present birth 1

MOTHER

(14) NAME BEFORE MARRIAGE Marionta Moore(15) PRESENT POSTOFFICE OF MOTHER Moultrieville SC(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 28 (Years)(18) BIRTHPLACE Bulls Island(19) OCCUPATION House wife(21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Alive at 6 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) W. Brown(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife W. Thasaut SC

Given name added from a supplemental report

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

(27) Filed May 6, 1922 (28) Chas. Allen 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.

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