

(1) PLACE OF BIRTH  
County of Chester  
Township of .....  
or  
Inc. Town of .....  
or  
City of .....

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

File No.—For State Registrar Only  
**18058**

Registration District No. 11A Registered No. 52  
(For use of Local Registrar)

(No. .... St.; .... Ward)  
If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child William Thomas If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth 10 (6) Are Parents Married? Yes (7) DATE OF BIRTH 6-14-22  
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME James A. Thomas  
(9) PRESENT POSTOFFICE OF FATHER Chester  
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 50  
(Years) (12) BIRTHPLACE Chester S.C.

(13) OCCUPATION Farmer

(20) Number of children born to mother, including present birth 11

MOTHER.

(14) NAME BEFORE MARRIAGE Marie Ann  
(15) PRESENT POSTOFFICE OF MOTHER Chester  
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 44  
(Years) (18) BIRTHPLACE Chester S.C.

(19) OCCUPATION Farmer

(21) Number of children of this mother now living, including present birth 11

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

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

(23) (Signature) Francis J. Davis

(24) State whether Physician or Midwife Midwife

(25) Address of Physician or Midwife Chester S.C.

Given name added from a supplemental report

(26) Witness Martha Todd

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

(27) Filed June 15, 22

(28) J. H. Hurdure 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.