

(1) PLACE OF BIRTH

County of SaludaTownship of # 2or
Inc. Town of.....or
City of.....(No. St.; Ward)
(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

27815

Registration District No. 39A1.. Registered No. 65.....
(For use of Local Registrar)(2) Full Name of Child Eussie Re Thomas..... (If child is not yet named, make supplemental report as directed)

| | | | | |
|-----------------|--|-----------------------------|------------------------------------|--|
| 3) BOY OR GIRL? | 4) Twin or Triplet? To be answered only in event of Twins or Triplets | 5) Number in order of birth | 6) Are Parents Married? <u>yes</u> | 7) DATE OF BIRTH <u>Jan 28, 1922</u> (Name of Month) (Day) (Year) |
|-----------------|--|-----------------------------|------------------------------------|--|

FATHER.

8) FULL NAME Andrew Thomas9) PRESENT POSTOFFICE OF FATHER Hard10) COLOR OR RACE White 11) AGE AT LAST BIRTHDAY 28
(Years)12) BIRTHPLACE Saluda Co13) OCCUPATION Farmer20) Number of children born to mother, including present birth 3

MOTHER.

14) NAME BEFORE MARRIAGE Sempra Thomas15) PRESENT POSTOFFICE OF MOTHER Hard16) COLOR OR RACE White 17) AGE AT LAST BIRTHDAY 24
(Years)18) BIRTHPLACE Saluda19) OCCUPATION Housewife21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was above at 12 M.,
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Alsie Artemus(24) State whether Physician or Midwife Mid (25) Address of Physician or Midwife Bridge Spring

Given name added from a supplemental report

(26) Witness.....
(Signature of Witness necessary only when question 23 is signed by mark)(27) Filed Sept 8, 1922 (28) F. H. Bronck
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.