

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.

(1) PLACE OF BIRTH

County of Spartanburg  
 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  
**20084**

Registration District No. 40-A Registered No. 276  
 (For use of Local Registrar)  
 (No. 717 Green St.; ..... Ward)

(2) Full Name of Child

Thomas

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

(3) BOY OR GIRL? Girl (4) Twin or Triplet? ..... (5) Number in order of birth 3 (6) Are Parents Married? yes (7) DATE OF BIRTH June 5, 1922  
 (Same of Month) (Day) (Year)

FATHER.

(8) FULL NAME B. A. Thomas  
 (9) PRESENT POSTOFFICE OF FATHER Spartanburg, S.C.  
 (10) COLOR OR RACE N (11) AGE AT LAST BIRTHDAY 26 (Years)  
 (12) BIRTHPLACE Boiling Springs, S.C.  
 (13) OCCUPATION Mechanic  
 (20) Number of children born to mother, including present birth 3

MOTHER.

(14) NAME BEFORE MARRIAGE Grace Thomas  
 (15) PRESENT POSTOFFICE OF MOTHER Spartanburg, S.C.  
 (16) COLOR OR RACE N (17) AGE AT LAST BIRTHDAY 24 (Years)  
 (18) BIRTHPLACE S.C.  
 (19) OCCUPATION Housewife  
 (21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 4 A.M. on the date above stated. (Hour A. M. or P. M.)

(23) (Signature) R. J. Cope  
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife Spartanburg, S.C.

Given name added from a supplemental report  
 .....  
 .....  
 ..... 19 ..... Registrar

(26) Witness .....  
 (Signature of Witness necessary only when question 23 is signed by mark)  
 (27) Filed 7-1-22 (28) Jas. Cope 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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MCRAW OF COLUMBIA, COLUMBIA, S. C.