

1. PLACE OF BIRTH STATE OF TEXAS		TEXAS DEPARTMENT OF HEALTH <b>BUREAU OF VITAL STATISTICS</b> STANDARD CERTIFICATE OF BIRTH	
COUNTY OF <u>Bastrop</u>			
CITY OR PRECINCT NO. <u>Smithville</u>		GIVE STREET AND NUMBER OR NAME OF INSTITUTION	
2. FULL NAME OF CHILD <u>Billy Odelle McClure</u>			
RESIDENCE OF THE MOTHER   STREET AND NO. _____ CITY _____ COUNTY _____ STATE _____			
3. SEX <u>Female</u>	FOR PLURAL BIRTHS ONLY 4. TWIN, TRIPLET, OTHER _____ 5. NUMBER IN ORDER OF BIRTH _____		6. LEGITIMATE? <u>Yes</u>
		7. DATE OF BIRTH <u>February 12, 1927</u>	
8. FULL NAME <u>Wm. McClure</u>		14. FULL MAIDEN NAME <u>Lilly Dale McClure</u>	
SOCIAL SECURITY NUMBER _____		SOCIAL SECURITY NUMBER _____	
9. POSTOFFICE ADDRESS <u>Smithville Texas</u>		15. POSTOFFICE ADDRESS <u>Smithville, Texas</u>	
10. COLOR OR RACE <u>White</u>	11. AGE AT LAST BIRTHDAY -- -- (YEARS)	16. COLOR OR RACE <u>White</u>	17. AGE AT LAST BIRTHDAY -- -- (YEARS)
12. BIRTHPLACE (STATE OR COUNTRY) -- -- --		18. BIRTHPLACE (STATE OR COUNTRY) -- -- --	
OCCUPATION 13A. TRADE, PROFESSION OR KIND OF WORK DONE -- -- -- 13B. INDUSTRY OR BUSINESS IN WHICH ENGAGED -- -- --		OCCUPATION 19A. TRADE, PROFESSION OR KIND OF WORK DONE -- -- -- 19B. INDUSTRY OR BUSINESS IN WHICH ENGAGED -- -- --	
20. NUMBER OF CHILDREN BORN TO THIS MOTHER INCLUDING THIS BIRTH -- -- --		21. NUMBER OF CHILDREN BORN TO THIS MOTHER AND NOW LIVING -- -- --	
SIGNATURE OF INFORMANT <u>Lilly Dale McClure</u>		ADDRESS OF INFORMANT <u>Smithville</u> , TEXAS	
22. CERTIFICATION I HEREBY CERTIFY TO THE BIRTH OF THIS CHILD <u>BORN ALIVE</u> AT <u>SMITHVILLE</u> M. ON THE ABOVE DATE. AND THE PROPHYLACTIC USED TO PREVENT OPHTHALMIA NEONATORUM WAS _____			
DATE 19 <u>27</u>	SIGNATURE <u>Dr. Geo. M. Jones</u>	M. D. MIDWIFE <u>X</u>	POST-OFFICE ADDRESS <u>Smithville</u> , TEXAS
23. FILE NUMBER <u>86</u>	FILE DATE <u>March 14, 1927</u>	SIGNATURE OF LOCAL REGISTRAR <u>Tignal Jones, County Clerk</u>	POST-OFFICE ADDRESS <u>Bastrop</u> , TEXAS

MILITARY EX-SERVICE RECORD OF FATHER

(A) IS THE FATHER REPORTED TO HAVE BEEN IN SUCH SERVICE? \_\_\_\_\_

(B) NAME OF ORGANIZATION IN WHICH SERVICE WAS RENDERED \_\_\_\_\_

(C) SERIAL NUMBER OF DISCHARGE PAPERS OR ADJUSTED SERVICE CERTIFICATE \_\_\_\_\_

STATE OF TEXAS }  
COUNTY OF Bastrop

I HEREBY CERTIFY that the above certificate is a true and accurate copy of the record of birth of Billy Odelle McClure, filed in my office, and is of record on Page 93 Vol. 3 of the Records of Births of Bastrop County, Texas.

Witness my hand and seal of office this 9th day of November 19 55

Tignal Jones  
County Clerk Bastrop County, Texas.

Archie Lee Alexander Deputy.