

STATE OF TEXAS
CERTIFICATION OF VITAL RECORD

DEPARTMENT OF STATE HEALTH SERVICES
VITAL STATISTICS UNIT

1. PLACE OF BIRTH STATE OF TEXAS		TEXAS DEPARTMENT OF HEALTH BUREAU OF VITAL STATISTICS STANDARD CERTIFICATE OF BIRTH		66344	
COUNTY OF <u>Harris</u>		CITY OR PRECINCT NO. <u>Goose Creek Texas</u> <u>Goose Creek Hospital</u> GIVE STREET AND NUMBER OR NAME OF INSTITUTION			
2. FULL NAME OF CHILD <u>Barbara Kay Domment</u>					
RESIDENCE OF THE MOTHER		STREET AND NO. <u>303 Illinois</u> CITY <u>Baytown</u> COUNTY <u>Harris</u> STATE <u>Texas</u>			
3. SEX <u>Female</u>	FOR PLURAL BIRTHS ONLY: 4. TWIN, TRIPLET, OTHER		5. NUMBER, IN ORDER OF BIRTH	6. LEGITIMATE?	7. DATE OF BIRTH <u>6-28-1943</u>
FATHER 8. FULL NAME <u>Earl Harvey Domment</u>			MOTHER 14. FULL MAIDEN NAME <u>Elizabeth Helen Marxick</u>		
SOCIAL SECURITY NUMBER			SOCIAL SECURITY NUMBER		
9. POSTOFFICE ADDRESS <u>Baytown Texas</u>			15. POSTOFFICE ADDRESS <u>Baytown Texas</u>		
10. COLOR OR RACE <u>White</u>	11. AGE AT LAST BIRTHDAY <u>29</u> (YEARS)		16. COLOR OR RACE <u>White</u>	17. AGE AT LAST BIRTHDAY <u>26</u> (YEARS)	
12. BIRTHPLACE (STATE OR COUNTRY) <u>Morse, Va.</u>			18. BIRTHPLACE (STATE OR COUNTRY) <u>Pine Bluff, Ark.</u>		
13A. TRADE, PROFESSION OR KIND OF WORK DONE <u>Electrician</u>			19A. TRADE, PROFESSION OR KIND OF WORK DONE <u>own home</u>		
13B. INDUSTRY OR BUSINESS IN WHICH ENGAGED <u>Humble Oil & Ref.</u>			19B. INDUSTRY OR BUSINESS IN WHICH ENGAGED <u>Housewife</u>		
20. NUMBER OF CHILDREN BORN TO THIS MOTHER INCLUDING THIS BIRTH <u>2</u>			21. NUMBER OF CHILDREN BORN TO THIS MOTHER AND NOW LIVING		
SIGNATURE OF INFORMANT <u>Mrs E. H. Domment</u>			ADDRESS OF INFORMANT <u>Baytown</u> TEXAS		
22. MEDICAL ATTENDANCE					
I HEREBY CERTIFY THAT I ATTENDED THE BIRTH OF THIS CHILD <u>BORN ALIVE</u> AT <u>3:45</u> P.M. ON THE ABOVE DATE.					
AND THE PROPHYLACTIC USED TO PREVENT OPHTHALMIA NEONATORUM WAS <u>1% Ag NO3</u>					
DATE <u>6-30-1943</u>		SIGNATURE <u>J. C. Halsamback</u>		M. D. <u>Goose Creek</u> TEXAS	
23. FILE NUMBER <u>2966-30</u>		FILE DATE <u>30</u>		SIGNATURE OF LOCAL REGISTRAR <u>L. Robbins</u> POSTOFFICE ADDRESS <u>Goose Creek</u>	

QA07524966



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ISSUED MAR 08 2016

Geraldine R. Harris
 GERALDINE R. HARRIS
 STATE REGISTRAR

WARNING: THIS DOCUMENT HAS A DARK BLUE BORDER AND A COLORED BACKGROUND

