

NOT TO BE USED IN CASE OF TWINS OR TRIPLETS

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.

County of Columbia

(1) PLACE OF BIRTH

County of Union

Township of Union

Inc. Town of Union

City of Union

(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

83718

Registration District No. 42-H

Registered No. 163

(For use of Local Registrar)

(2) Full Name of Child

Woodrow Wilson Green

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

(3) BOY OR GIRL?

(4) Twin or Triplet?

(5) Number in order of birth

(6) Are Parents Married?

(7) DATE OF BIRTH

Oct. 28, 1916

FATHER.

(8) FULL NAME

J. J. Green

(9) PRESENT POSTOFFICE OF FATHER

Union 8P

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

32

(12) BIRTHPLACE

Relieford, Co. N.C.

(13) OCCUPATION

Mill work

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

Five

MOTHER.

(14) NAME BEFORE MARRIAGE

Paula Nicholson

(15) PRESENT POSTOFFICE OF MOTHER

Union 8P

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

34

(18) BIRTHPLACE

Cherokee Co 8P

(19) OCCUPATION

Domestic

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

Five

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was

Born alive

at 8P, M.

(23) (Signature)

W. H. Hays

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Physician

Union 8P

Given name added from a supplemental report

(26) Witness

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

(27) Filed

Oct 30 1916

(28)

D. S. Sarrett

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 fourth month of pregnancy.

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