

**CERTIFICATE OF BIRTH**

File No.—For State Registrar Only  
**72988**

(1) PLACE OF BIRTH  
County of Greenville STATE OF SOUTH CAROLINA.  
Township of Wadesville Bureau of Vital Statistics  
or Wadesville State Board of Health  
Inc. or Town of Wadesville Registration District No. 2209  
or City of Wadesville Registered No. 399  
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Amin { If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? girl (4) Twin or Triplet? no (5) Number in order of birth — (6) Are Parents Married? no (7) DATE OF BIRTH Aug 10 1916  
To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

**FATHER.**  
(8) FULL NAME Earnest A. Min  
(9) PRESENT POSTOFFICE OF FATHER Greenville SC  
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 20 (Years)  
(12) BIRTHPLACE Fairburn GA  
(13) OCCUPATION Self till  
(20) Number of children born to mother, including present birth { 2 .....

**MOTHER.**  
(14) NAME BEFORE MARRIAGE Mattie Lewis  
(15) PRESENT POSTOFFICE OF MOTHER Greenville  
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 19 (Years)  
(18) BIRTHPLACE Beaufort  
(19) OCCUPATION Domestic  
(21) 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 alive at 7 ..... M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) [Signature]  
(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Physician Greenville SC

Given name added from a supplemental report  
....., 191.....  
.....  
Registrar

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

(27) Filed Aug 10 1916 (28) A. H. Mackey Local Registrar.

MARGIN RESERVED FOR BINDING. WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD. N. B.—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. McCaw, of Columbia.

\*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.