

NOTE: WHERE NECESSARY, USE ONE SEPARATE BLANK FOR EACH CHILD, AND MARK THE  
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.

(1) PLACE OF BIRTH

County of Greenville  
Township of Greenville  
or  
Inc. Town of  
or  
City of Greenville, S.C.  
(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  
89916

Registration District No. .... Registered No. ....  
(For use of Registrar)

(2) Full Name of Child Norman Edward Ross If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Boy (4) Twin or Triplet? X (5) Number in order of birth X (6) Are Parents Married? Yes (7) DATE OF BIRTH Dec 5 1916  
(Name of Month) (Day) (Year)

FATHER.  
(8) FULL NAME Clifton J. Ross.  
(9) PRESENT POSTOFFICE OF FATHER Greenville, S.C.  
(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 37 (Years)  
(12) BIRTHPLACE McBrides Wick,  
(13) OCCUPATION Oil Well Supt.  
(20) Number of children born to mother, including present birth Three

MOTHER.  
(14) NAME BEFORE MARRIAGE Essie O. Fisher  
(15) PRESENT POSTOFFICE OF MOTHER Greenville, S.C.  
(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 37 (Years)  
(18) BIRTHPLACE Lexington Ill.  
(19) OCCUPATION House wife.  
(21) Number of children of this mother now living, including present birth Three.

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was B. Allen at 8 A.M. on the date above stated. (Hour A. M. or P. M.)

(23) (Signature) W. D. Pack  
(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Greenville, S.C.

Given name added from a supplemental report  
(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)  
(27) Filed Dec 5 1916 (28) C. Smith 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.