

(1) PLACE OF BIRTH

County of Greenville
 Township of Greenville
 or
 Inc. Town of
 or
 City of Greenville

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
 Bureau of Vital Statistics
 State Board of Health

File No. — For State Registrar Only

18810

Registration District No. 2209ARegistered No. 202
(For use of Local Registrar)(No. 2209A St.; Ward)
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child

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

(3) BOY OR GIRL? Girl
 (4) Twin or Triplet?
 To be answered only in event of Twins or Triplets

(5) Number in order of birth
 (6) Are Parents Married? Yes

(7) DATE OF BIRTH May 17 19 20
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME James M. Taylor
 (9) PRESENT POSTOFFICE OF FATHER Greenville
 (10) COLOR OR RACE White
 (11) AGE AT LAST BIRTHDAY 27 (Years)
 (12) BIRTHPLACE Laurens Co. S.C.
 (13) OCCUPATION Textile Worker
 (20) Number of children born to mother, including present birth 1 8

MOTHER.

(14) NAME BEFORE MARRIAGE Lula May Cantelero
 (15) PRESENT POSTOFFICE OF MOTHER Greenville
 (16) COLOR OR RACE White
 (17) AGE AT LAST BIRTHDAY 36 (Years)
 (18) BIRTHPLACE Greenville
 (19) OCCUPATION Housewife
 (21) Number of children of this mother now living, including present birth 1 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was at AM.
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Chas. A. Taylor(24) State whether Physician or Midwife Midwife(25) Address of Physician or Midwife 1800 2nd St.

Given name added from a supplemental report

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

(27) Filed June 15 19 20 (28) A. H. Mackey
 Registrar 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.

*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.