

(1) PLACE OF BIRTH

County of GreenvilleTownship of Butleror  
Inc. Town of

City of

(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

12074

Registration District No. 2202Registered No. 112

(For use of Local Registrar)

St. Ward

(2) Full Name of Child Charles Allen Griffith

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

(3) BOY OR GIRL? Boy(4) Twin or Triplet? No(5) Number in order of birth 1st(6) Are Parents Married? Yes(7) DATE OF BIRTH Dec. 30, 1916

(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME William P. Griffith(9) PRESENT POSTOFFICE OF FATHER Green S.C. 14th St.(10) COLOR OR RACE White(11) AGE AT LAST BIRTHDAY 42

(Years)

(12) BIRTHPLACE Greenville Co(13) OCCUPATION Farmer(20) Number of children born to mother, including present birth 12

## MOTHER.

(14) NAME BEFORE MARRIAGE Emma Cole(15) PRESENT POSTOFFICE OF MOTHER Green S.C. 14th St.(16) COLOR OR RACE White(17) AGE AT LAST BIRTHDAY 41

(Years)

(18) BIRTHPLACE Greenville Co(19) OCCUPATION Housewife(21) Number of children of this mother now living, including present birth 12

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born at 5 P.M. on the date above stated. (born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) H. F. McCall(24) State whether Physician or Midwife (25) Address of Physician or Midwife Green S.C. 14th St.

Given name added from a supplemental report

June 8, 1916GreenvilleSuply Registrar

(26) Witness

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

(27) Filed Jan 8, 1916(28) H. F. McCall Local Registrar

When there was no attending physician or midwife, then the father, householder, etc., should make the report. 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.

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 8.

W

N

McCall

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