

(1) PLACE OF BIRTH

County of OrangeburgTownship of Orangeburgor Inc. Town of OrangeburgCity of Orangeburg, S.C.

If birth occurs in a hospital or other institution, give name of same instead of street and number.

(2) Full Name of Child Marilynn E. Green

(3) BOY OR GIRL girl (4) Twin or Triplet No (5) Number in order of birth 1 (6) Are Parents Married Yes (7) DATE OF BIRTH Sept. 18, 1942
(Name, Month, Day, Year)

FATHER: (8) FULL NAME L. R. Green Sr. (14) NAME BEFORE MARRIAGE Cora V. Reason

(9) PRESENT POSTOFFICE OF FATHER Orangeburg, S.C. (15) PRESENT POSTOFFICE OF MOTHER Orangeburg, S.C.

(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 38 (16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 28
(Year)

(12) BIRTHPLACE Columbia, S.C. (18) BIRTHPLACE Greenwood, S.C.

(13) OCCUPATION Physician (19) OCCUPATION Teacher

(20) Number of children born to mother, including present birth Two (21) Number of children of this mother now living, including present birth Two

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 2 P.M. on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)

(23) (Signature) Dr. Daniel Henry S. R. Green (24) State whether Physician or Midwife Physician

(25) Address of Physician or Midwife Orangeburg, 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 Oct. 7, 1942 (28) W. H. Hakes 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.

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