

(1) PLACE OF BIRTH

County of Greenville

Township of

or
Inc. Town ofor
City of Greenville

(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

42573

Registration District No. 2.2.ARegistered No. 624

(For use of Local Registrar)

(2) Full Name of Child Hattie Laura Murdock

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

3) BOY OR GIRL <u>girl</u>	4) Twin or Triplet? To be answered only in event of Twins or Triplets	5) Number in order of birth	6) Are Parents Married? <u>yes</u>	7) DATE OF BIRTH <u>Dec. 21, 1922</u> (Name of Month) (Day) (Year)
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FATHER.

3) FULL NAME Thomas A. Murdock5) PRESENT POSTOFFICE OF FATHER Greenville, S.C.10) COLOR OR RACE white 11) AGE AT LAST BIRTHDAY 31
(Years)12) BIRTHPLACE N.C.13) OCCUPATION Scholar20) Number of children born to mother, including present birth - 3 -

MOTHER.

14) NAME BEFORE MARRIAGE Fannie Yow15) PRESENT POSTOFFICE OF MOTHER Greenville, S.C.16) COLOR OR RACE white 17) AGE AT LAST BIRTHDAY 26
(Years)18) BIRTHPLACE N.C.19) OCCUPATION Housewife21) 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 born alive at 10 P.M.
on the date above stated. (Born alive or stillborn) (Hour, M. or P. M.)(23) (Signature) J. J. Jones, M.D.(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 22, 1922 (28) C. E. 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.

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