

## (1) PLACE OF BIRTH

County of GreenvilleTownship of Greenvilleor GreenvilleCity 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

28598

Registration District No. .... Registered No. 27092

(For use of Local Registrar)

(No. 1 of 1 (St. 1 of 1 (Card))(2) Full Name of Child James A. Edge

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

3. BOY OR GIRL

4. Twin or Triplet

5. Number in order of birth

6. Are Parents Married

7. DATE OF BIRTH

July 23 1923

(Month of Month) (Day) (Year)

## FATHER.

8. FULL NAME

James A. Edge

9. PRESENT POSTOFFICE OF FATHER

Greenville SC

10. COLOR OR RACE

White

11. AGE AT LAST BIRTHDAY

21 (Years)

12. BIRTHPLACE

SC

13. OCCUPATION

Farmer

## MOTHER.

14. NAME BEFORE MARRIAGE

Herbert T. Edge

15. PRESENT POSTOFFICE OF MOTHER

Greenville SC

16. COLOR OR RACE

White

17. AGE AT LAST BIRTHDAY

20 (Years)

18. BIRTHPLACE

Shelburne SC

19. OCCUPATION

Domestic

20. Number of children born to mother, including present birth

1

21. Number of children of this mother now living, including present birth

one

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(22) I hereby certify that I attended the birth of this child, who was born at Greenville, S.C. (Born alive or stillborn) (Hour 9 A. M. or P. M.)

(on the date above stated.)

(23) (Signature) John T. Warren

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Greenville SC

Given name added from a supplemental report

(26) Witness

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

(27) Filed

Sept 24 1923 (28) A. J. Mackey 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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