No. 8

(1) PLACE OF BIRTH

County of Greenville

Township of Greenville

or Inc. Town of Mills Mill

or City of Greenville

CERTIFICATE OF BIRTH

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

File No. to be filled by State Registrar Only: 14201

Registration District No. 1490 Registered No. 146
(For use of Local Registrar)

(No. 30 Selby St. 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 R. G. Arrowood

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

(3) BOY OR GIRL? boy

(4) Twin or Triplet? Y

(5) Number in order of birth Y

To be answered only in event of Twins or Triplets

(6) Are Parents Married? Yes

(7) DATE OF BIRTH Mar 24 19 23 (Name of Month) (Day) (Year)

FATHER	MOTHER
(8) FULL NAME John Washington Arrowood	(14) NAME BEFORE MARRIAGE Ethel Alexandy
(9) PRESENT POSTOFFICE OF FATHER Greenville S. C.	(15) PRESENT POSTOFFICE OF MOTHER Greenville S. C.
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 37 (Years)	(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 30 (Years)
(12) BIRTHPLACE Latrobe Penn.	(18) BIRTHPLACE Latrobe Penn
(13) OCCUPATION Foreman.	(19) OCCUPATION House wife
(20) Number of children born to mother, including present birth (One (1))	(21) Number of children of this mother now living, including present birth (One (1))

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 12-30 P. M. on the date above stated.
(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. B. Ledbetter 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

..... 19 ....
Registrar

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

(27) Filed May 1 1923 (28) Lena Mae
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.