

N.B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the McCaw, of Columbia FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

(1) PLACE OF BIRTH

County of Greenville  
Township of Greenville  
or  
Inc. Town of Woodside Hill  
or  
City of Woodside Hill

CERTIFICATE OF BIRTH  
STATE OF SOUTH CAROLINA.  
Bureau of Vital Statistics  
State Board of Health

File No.—For State Registrar Only  
**64564**

Registration District No. 2209 Registered No. 305  
(For use of Local Registrar)  
(No. 17-19 & 3) 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 Emilia Marie Taylor

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

(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 6 10-6  
(Name of Month) (Day) (Year)

FATHER.  
(8) FULL NAME James Franklin Taylor  
(9) PRESENT POSTOFFICE OF FATHER Greenville S.C. 17 E 5th St  
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 34  
(12) BIRTHPLACE S.C.  
(13) OCCUPATION Mill Operator  
(20) Number of children born to mother, including present birth 3

MOTHER.  
(14) NAME BEFORE MARRIAGE Esther J. Speller (Taylor)  
(15) PRESENT POSTOFFICE OF MOTHER Greenville S.C. 17 E 5th St  
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 27  
(18) BIRTHPLACE S.C.  
(19) OCCUPATION Housewife  
(21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was born at 130 P M., on the date above stated. (Equal to live or stillborn) (Hour A. M. or P. M.)

(23) (Signature) [Signature]

(24) State whether Physician or Midwife (25) Address of Physician or Midwife Physician Greenville S.C.

Given name added from a supplemental report  
..... 191.....  
..... 191.....  
Registrar

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

(27) June 29 1916 (28) A. H. Mackay 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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