

THIS IS A PERMANENT RECORD.
In case of TWINS or TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the
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
or
City of Union Beach
(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
22377

Registration District No. 2209A Registered No. 237
(For use of Local Registrar)

(2) Full Name of Child
(If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL? <u>Boy</u>	(4) Twin or Triplet? <u>No</u> To be answered only in event of Twins or Triplets	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>June 6, 22</u> (Name of Month) (Day) (Year)
FATHER.			MOTHER.	
(8) FULL NAME <u>Marven Edwin Robinson</u>			(14) NAME BEFORE MARRIAGE <u>Edlee Foster</u>	
(9) PRESENT POSTOFFICE OF FATHER <u>Respt 3 Union Beach Greenville SC</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Same</u>	
(10) COLOR OR RACE <u>White</u>			(16) COLOR OR RACE <u>White</u>	
(11) AGE AT LAST BIRTHDAY <u>33</u> (Years)			(17) AGE AT LAST BIRTHDAY <u>30</u> (Years)	
(12) BIRTHPLACE <u>Greenville SC</u>			(18) BIRTHPLACE <u>Greenville SC</u>	
(13) OCCUPATION <u>Textile Worker</u>			(19) OCCUPATION <u>Domestic</u>	
(20) Number of children born to mother, including present birth <u>6</u>			(21) Number of children of this mother now living, including present birth <u>5</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

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

(23) (Signature) Ches. Benson

(24) State whether Physician or Midwife Midwife

(25) Address of Physician or Midwife P.O. No. 5 GREENVILLE, S. C.

Given name added from a supplemental report

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

(27) Filed Aug 9, 22 (28) A. V. Mack
Registrar 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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