

(1) PLACE OF BIRTH

County of Greenville
 Township of Greenville
 or
 Inc. Town of Greenville Mill
 or
 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
26407

Registration District No. 2409B Registered No. 264
 (For use of Local Registrar)

(No. 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 Baby Lindsey (If child is not yet named, make supplemental report as directed)

3. ☒ BOY OR GIRL ☐ Twin or Triplet? (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH 1-21-22
 (Name of Month) (Day) (Year)
 To be answered only in event of Twins or Triplets

FATHER.

4. FULL NAME L. Lindsey
 5. PRESENT POSTOFFICE OF FATHER Greenville Mill
 10. COLOR OR RACE W. (11) AGE AT LAST BIRTHDAY 30 (Years)
 12. BIRTHPLACE Sc
 13. OCCUPATION Teacher
 20. Number of children born to mother, including present birth 6

MOTHER.

14. NAME BEFORE MARRIAGE Mrs. Lindsey
 15. PRESENT POSTOFFICE OF MOTHER Greenville Mill
 16. COLOR OR RACE W. (17) AGE AT LAST BIRTHDAY 23 (Years)
 18. BIRTHPLACE Sc
 19. OCCUPATION Housewife
 21. Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 17 40 on the date above stated.
 (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) [Signature]

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

Given name added from a supplemental report

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

(27) Filed Aug 1-1922 (28) [Signature] 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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