

WRITE PLAINLY, WITH UNFADING INK.—THIS IS A PERMANENT RECORD.
 M. B.—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 Spartanburg
 Township of Nordrup
 or
 Inc. Town of
 or
 City of

CERTIFICATE OF BIRTH

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

No. — For State Registrar's Use
30277

Registration District No. 4009 Registered No. 101
 (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

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

(3) BOY OR GIRL girl (4) Twin or Triplet X (5) Number in order of birth X (6) Are Parents Married yes (7) DATE OF BIRTH Sept 23, 1923
 (Month of Month) (Day) (Year)

FATHER

(8) FULL NAME Henry Trammell
 (9) PRESENT POSTOFFICE OF FATHER Nordrup SC
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 21
 (Year)
 (12) BIRTHPLACE SC
 (13) OCCUPATION mill operative

MOTHER

(14) NAME BEFORE MARRIAGE Bess Toddell
 (15) PRESENT POSTOFFICE OF MOTHER Nordrup SC
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 27
 (Year)
 (18) BIRTHPLACE SC
 (19) OCCUPATION Dom

(20) Number of children born to mother, including present birth 2 (21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 2:40 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) E. J. Workman
 (24) State whether Physician or Midwife Phys (25) Address of Physician or Midwife Nordrup SC

Given name added from a supplementary report
 (26) Witness (Signature of Witness necessary only when question 22 is signed by mark)
 (27) Filed Oct 12 1923 (28) Chas. T. Boyler 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.