

Form No. 1. THIS OTHER, No. 2, etc., in question 5.

(1) PLACE OF BIRTH

County of Spartanburg
Township of Peech Springs
or
Inc. Town of
or
City of Spartanburg Registration District No. 6.8.2A County County

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

File No.—For State Registrar Only
87363

Registered No. 1757
(For use of Local Registrar)

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

(3) BOY OR GIRL? Girl (4) Twin or Triplet? L (5) Number in order of birth L (6) Are Parents Married? Yes (7) DATE OF BIRTH Nov. 4th 1916
(Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME James Arthur Sullivan
(9) PRESENT POSTOFFICE OF FATHER Green, S.C.
(10) COLOR OR RACE Colored. (11) AGE AT LAST BIRTHDAY 25 (Years)
(12) BIRTHPLACE Simpsonville, S.C.
(13) OCCUPATION Laborer -
(20) Number of children born to mother, including present birth one

MOTHER.
(14) NAME BEFORE MARRIAGE Lula Gilliam
(15) PRESENT POSTOFFICE OF MOTHER Green, S.C.
(16) COLOR OR RACE Colored. (17) AGE AT LAST BIRTHDAY 25 (Years)
(18) BIRTHPLACE Greenville County -
(19) OCCUPATION Domestic
(21) Number of children of this mother now living, including present birth one

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 12:10 P. M. on the date above stated. (Hour A. M. or P. M.)
(23) (Signature) O. Bennett, M.D. Green, S.C.
(24) State whether Physician or Midwife (25) Address of Physician or Midwife

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

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed Nov. 5. 1916. (28) J. E. Wood 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.