

WRITE PLAINLY, WITH INK—THIS IS A PERMANENT RECORD
N. 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 Greenville
Township of
or
Inc. Town of
or
City of Greenville
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)
(2) Full Name of Child Arden David Shepherd
(If child is stillborn, make supplemental report as directed)

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

File No.—For State Registrar Only
224678

(3) BOY or GIRL Boy
(4) Twin or Triplet? No
(5) Number in order of birth 1
(6) Are Parents Married? Yes
(7) DATE OF BIRTH May 11, 1922
(Name of Month) (Day) (Year)
FATHER: (8) FULL NAME Emory C. Shepperd
(9) PRESENT POSTOFFICE OF FATHER Greenville
(10) COLOR OR RACE Wh
(11) AGE AT LAST BIRTHDAY 22
(12) BIRTHPLACE North Car
(13) OCCUPATION Textile
(14) NAME BEFORE MARRIAGE Shelby Higginbotham
(15) PRESENT POSTOFFICE OF MOTHER Greenville
(16) COLOR OR RACE Wh
(17) AGE AT LAST BIRTHDAY 18
(18) BIRTHPLACE Greenville
(19) OCCUPATION Domestic
(20) Number of children born to mother, including present birth 1
(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 at
on the date above stated. (Hour A. M. or P. M.)
(23) (Signature) [Signature]
(24) State whether Physician or Midwife
(25) Address of Physician or Midwife
Given name added from a supplemental report
(26) Witness
(Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed 6/19/22 19 (28) W. A. Williams
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.