

Form No. 1.

(1) PLACE OF BIRTH

County of Greenville
Township of Mountain
Inc. Town of Mountain
City of Mountain

CERTIFICATE OF BIRTH

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

File No. For State Registrar Only

85795

Registration District No. 2206 Registered No. 138
(For use of Local Registrar)
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? Boy (4) Twin or Triplet? one (5) Number in order of birth 2 (6) Are Parents Married? Yes (7) DATE OF BIRTH Nov. 24, 1916
(Name of Month) (Day) (Year)

FATHER.

MOTHER.

(8) FULL NAME Arms Eugene Swift (14) NAME BEFORE MARRIAGE Agnes Triff
(9) PRESENT POSTOFFICE OF FATHER Mountain Inn S.C. (15) PRESENT POSTOFFICE OF MOTHER Mountain Inn S.C.
(10) COLOR OR RACE White (16) AGE AT LAST BIRTHDAY 21 (17) AGE AT LAST BIRTHDAY 19
(12) BIRTHPLACE Greenville S.C. (18) BIRTHPLACE Greenville S.C.
(13) OCCUPATION Farmer (19) OCCUPATION House wife
(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 born at 10 P.M. on the date above stated. (Hour of birth or P.M.)

(23) (Signature) A. Shaw M.D. (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Mountain Inn S.C.

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 Dec 11, 1916 (28) J. J. Quaker Local Registrar

*When there was no attending physician or midwife, then the father, householder, etc., should make this return, and a child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.

MARGIN RESERVED FOR BINDING.
WRITE PLAINLY, WITH UNFADING 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.