

(1) PLACE OF BIRTH

County of GreenvilleTownship of Salisbury

Inc. Town of

City of

(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

46351

Registration District No. 2-2-5 Registered No. 1

(For use of Local Registrar)

(2) Full Name of Child Elmer Plunley } If child is not yet named, make supplemental report as directed(3) BOY OR GIRL? girl (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Jan. 2, 1916 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Morris Plunley(9) PRESENT POSTOFFICE OF FATHER Landrum S.C.(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 36 (Years)(12) BIRTHPLACE Greenville Co. S.C.(13) OCCUPATION Farming(14) Number of children born to mother, including present birth 7

MOTHER.

(15) NAME BEFORE MARRIAGE Ollie Center(16) PRESENT POSTOFFICE OF MOTHER Landrum S.C.(17) COLOR OR RACE White (18) AGE AT LAST BIRTHDAY 24 (Years)(19) BIRTHPLACE Greenville Co. S.C.(20) OCCUPATION Housewife(21) Number of children of this mother now living, including present birth 6

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 11 P.M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) J. E. Morrow(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Campbell's S.C.

Given name added from a supplemental report

June 28, 1916C. W. Miller Registrar

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

(27) Filed Jan. 3, 1916 (28) L. V. Phillips 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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