

## (1) PLACE OF BIRTH

County of GreenvilleTownship of Gantt

Inc. Town of

City of

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Odella Satson(3) BOY OR GIRL? Boy

(4) Twin or Triplet?

(5) Number in order of birth 1

To be answered only in event of Twins or Triplets

(6) Are Parents Married? Yes(7) DATE OF BIRTH Feb. 15, 1916  
(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME

(9) PRESENT POSTOFFICE OF FATHER

(10) COLOR OR RACE colored(11) AGE AT LAST BIRTHDAY 25  
(Years)

(12) BIRTHPLACE

(13) OCCUPATION

(20) Number of children born to mother, 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 the date above stated.  
(Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) E. E. P. Ineson(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Greenville, S. C.

Given name added from a supplemental report

(26) Witness

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

(27) Filed Mar. 6, 1916 (28) E. E. Hendrix, M.D.  
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.

fifth month of pregnancy.

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

4369

Registration District No. 2207 Registered No. 2  
(For use of Local Registrar)

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

## MOTHER.

(14) NAME BEFORE MARRIAGE

(15) PRESENT POSTOFFICE OF MOTHER

(16) COLOR OR RACE colored(17) AGE AT LAST BIRTHDAY 18  
(Years)

(18) BIRTHPLACE

(19) OCCUPATION

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