

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 3.

(1) PLACE OF BIRTH  
County of Greenville  
Township of Patig  
or  
Inc. Town of  
or  
City of

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

File No.—For State Registrar Only  
**42969**

Registration District No. 2201 Registered No. 77  
(For use of Local Registrar)

(2) Full Name of Child Myrtle Whilden If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Girl (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? (7) DATE OF BIRTH Dec 7th 1915  
(Name of Month) (Day) (Year)

FATHER.  
(8) FULL NAME Richard Furran Whilden  
(9) PRESENT POSTOFFICE OF FATHER R.F.D. #3 Travellers Rest, S.C.  
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 46 (Years)  
(12) BIRTHPLACE Greenville Co. S.C.  
(13) OCCUPATION Farmer  
(20) Number of children born to mother, including present birth 6

MOTHER.  
(14) NAME BEFORE MARRIAGE Carnie Luella Singleton  
(15) PRESENT POSTOFFICE OF MOTHER Same  
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 50 (Years)  
(18) BIRTHPLACE Greenville Co., S.C.  
(19) OCCUPATION AT HOME  
(21) Number of children of this mother now living, including present birth 5

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\***

(22) I hereby certify that I attended the birth of this child, who was born alive 5:10 P.M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)  
(23) (Signature) J. C. A. V. ...  
(24) State whether Physician or Midwife M.D. (25) Address of Physician or Midwife Travellers Rest, S.C.

Given name added from a supplemental report  
James ...  
Curmish ...  
Superintendent

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)  
(27) Filed Dec 1915 (28) J. C. A. V. 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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