

McCaw, of Columbia. In all cases 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 Greenville
 or
 Inc. Town of
 or
 City of Roseville
 (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

46389

Registration District No. 2209

Registered No. 1
 (For use of Local Registrar)

(2) Full Name of Child.....

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 1 24 1916
(Name of Month) (Day) (Year)

FATHER.

MOTHER.

(8) FULL NAME Louise Durson

(14) NAME BEFORE MARRIAGE Bessie Booker

(9) PRESENT POSTOFFICE OF FATHER Greenville, S.C. Riverside

(15) PRESENT POSTOFFICE OF MOTHER None

(10) COLOR OR RACE W (11) AGE AT LAST BIRTHDAY 24 (Years)

(16) COLOR OR RACE W (17) AGE AT LAST BIRTHDAY 23 (Years)

(12) BIRTHPLACE S.C.

(18) BIRTHPLACE S.C.

(13) OCCUPATION Millwork

(19) OCCUPATION house

(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 born at 445 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) [Signature]

(24) State whether Physician or Midwife (25) Address of Physician or Midwife Physician Greenville

Given name added from a supplemental report

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

(27) [Signature] 191... (28) [Signature] 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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