

FIRST-BORN, NO. 1. THE OTHER, NO. 2, ETC., IN QUESTION 5.

**(1) PLACE OF BIRTH**

County of Greenville  
 Township of Greenville  
 OF  
 Inc. Town of Union Bleachery  
 OR  
 City of .....

**CERTIFICATE OF BIRTH**

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

File No. — For State Registrar Only

**34634**

Registration District No. 2207A Registered No. 421  
 (For use of Local Registrar)

**(2) Full Name of Child**

(3) BOY OR GIRL? boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Sept 9, 1922  
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.) (If child is not yet named, make supplemental report as directed)

**FATHER.**

(8) FULL NAME David Shirley Robertson  
 (9) PRESENT POSTOFFICE OF FATHER 53 Union Ave. Union Bleachery  
 (10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 22 (Year)  
 (12) BIRTHPLACE Greenville Co.  
 (13) OCCUPATION Teacher  
 (20) Number of children born to mother, including present birth 2

**MOTHER.**

(14) NAME BEFORE MARRIAGE Mamie Sisco Ewington  
 (15) PRESENT POSTOFFICE OF MOTHER Same  
 (16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 22 (Year)  
 (18) BIRTHPLACE Greenville Co.  
 (19) OCCUPATION Housewife  
 (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 alive at 12:15 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Chas. P. Boren

(24) State whether Physician or Midwife MD

(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) Oct 11, 1922 (28) A. H. Mackey 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.

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.