

1) PLACE OF BIRTH
County of Spartanburg
Township of Reidsville

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

File No.—For State Registrar Only

50512

Inc. Town of or
City of (No. St.; Ward.)
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

Registration District No. 4007 Registered No. 18
(For use of Local Registrar)

(2) Full Name of Child May Ellen Page 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 3 (6) Are Parents Married? Yes (7) DATE OF BIRTH Feb 5 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME W E Page
(9) PRESENT POSTOFFICE OF FATHER Greenville SC
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 36 (Years)
(12) BIRTHPLACE Greenville S.C.
(13) OCCUPATION Mill Operator
(20) Number of children born to mother, including present birth 3

MOTHER.

(14) NAME BEFORE MARRIAGE Bessie Jackson
(15) PRESENT POSTOFFICE OF MOTHER Duncans Route SC
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 22 (Years)
(18) BIRTHPLACE Pickens Co -
(19) OCCUPATION House Keeper
(21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Alive at 7:00 P.M.,
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)
(23) (Signature) D. D. Duncanson
(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 23 is signed "Mark")

(27) Filed Feb 9, 1916 (28) D. D. Duncanson 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.

(Date of)

Address

State Registrar

Filed Feb 12, 1916

Local Registrar

MAILED IN REGISTRATION IN THE BUREAU OF VITAL STATISTICS. WITH UNPAID TAX—THIS IS A FURNISHED BLANK FOR EACH CHILD, AND MARK "X" IN CASE OF TWINS OR TRIPLETS AND A SEPARATE BLANK FOR EACH CHILD, IN QUESTION 5, FIRST-BORN, NO. 1. THE OTHER, NO. 2, ETC.