

(1) PLACE OF BIRTH

County of Greenville

Township of

or
Inc. Town ofCity of Greenville

(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 HealthFile No.—for State Registrar
28454Registration District No. 27A Registered No. 479
(For use of Local Registrar)(2) Full Name of Child Ethel Louise Martin (No. Montgomery Hwy. St.; Ward)
(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) Age yr. (7) DATE OF BIRTH Sept 20 1923
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Bradley W. Martin(9) PRESENT POSTOFFICE OF FATHER 117 Hampton Ave
Greenville S.C.(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 25 (Year)(12) BIRTHPLACE Greenville Co.(13) OCCUPATION Civil Engineer(14) Number of children born to mother, including present birth 2

MOTHER.

(15) NAME BEFORE MARRIAGE Ethel French(16) PRESENT POSTOFFICE OF MOTHER 117 Hampton Ave
Greenville S.C.(17) COLOR OR RACE white (18) AGE AT LAST BIRTHDAY 27 (Year)(19) BIRTHPLACE Greenville Co.(20) 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 4 A.M.
on the date above stated. (Born alive or stillborn) (Hour, M. or P. M.)(23) (Signature) James E. Daniel

(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 by birth mother)(27) Filed Sept 20 1923 (28) C. E. Smith 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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