

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only
72998

(1) PLACE OF BIRTH

County of Greenville
Township of Greenville

OR
Inc. Town of Registration District No. 2209 Registered No. 412
OR
City of (No. 67 American Legion Co. St.; Ward)
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(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? (5) Number in order of birth (6) Are Yes Parents Married? (7) DATE OF BIRTH Aug. 12, 1916
To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

MOTHER.

(8) FULL NAME Thos a Szymore

(14) NAME BEFORE MARRIAGE Julia Robinson

(9) PRESENT POSTOFFICE OF FATHER greenville

(15) PRESENT POSTOFFICE OF MOTHER greenville

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 55 (Years)

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 36 (Years)

(12) BIRTHPLACE greenville co

(18) BIRTHPLACE abbeville co

(13) OCCUPATION mill Supt

(19) OCCUPATION Home wife

(20) Number of children born to mother, including present birth { 4 }

(21) Number of children of this mother now living, including present birth { 4 }

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 4:30 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) W. Edmington
(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)

..... 191.....
Registrar

(27) Filed Sept 3 1916 (28) a W Mackay Local Registrar

MARGIN RESERVED FOR BINDING.

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.

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 5.

McCaw, of Columbia.

*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.