

(1) PLACE OF BIRTH

CERTIFICATE OF BIRTH

County of Greenville
Township of Greenville

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

File No.—For State Registrar Only

45393

Inc. Town of Registration District No. 2209 Registered No. 39
(For use of Local Registrar)
or
City of Rutherford Rd. 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 Marnie Ann Turner (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 Parents Married? ye (7) DATE OF BIRTH July 23, 1916
(Name of Month) (Day) (Year)

FATHER.

MOTHER.

(8) FULL NAME J. Weldon Freeman

(14) NAME BEFORE MARRIAGE Maudy Osteen

(9) PRESENT POSTOFFICE OF FATHER Greenville

(15) PRESENT POSTOFFICE OF MOTHER Greenville

(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 33 (Years)

(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 28 (Years)

(12) BIRTHPLACE N. C.

(18) BIRTHPLACE N. C.

(13) OCCUPATION Salesman

(19) OCCUPATION Housewife

(20) Number of children born to mother, including present birth 3

(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 5:27 am on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) W. Eugene B. Brown

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

Given name added from a supplemental report
9/10 1916
Chryselles
Deputy Registrar

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

(27) Filed Feb 3 1916 (28) A. H. Mackley 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.

Registrar I Local Registrar

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SEPARATE BLANK FOR EACH CHILD, AND MARK THE FIRST-BORN. NO. 1. THE OTHER, NO. 2, ETC., IN QUESTION 5.

McCaw, of Columbia