

MARGIN RESERVED FOR BINDING.  
 WHITE PLAINLY, WITH UNFADING INK.—THIS IS A PERMANENT RECORD.  
 N. H.—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.

(1) PLACE OF BIRTH

County of Greenville  
 Township of Butler  
 or  
 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.)

**CERTIFICATE OF BIRTH**  
 STATE OF SOUTH CAROLINA  
 Bureau of Vital Statistics  
 State Board of Health

File No. For State Registrar Only  
**77222**

Registration District No. 2207 Registered No. 62  
 (For use of Local Registrar)

(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 Parents Married? Yes (7) DATE OF BIRTH 8 5 1919  
 (Name of Month) (Day) (Year)

**FATHER.**  
 (8) FULL NAME P. W. Vaughan  
 (9) PRESENT POSTOFFICE OF FATHER Greer R 4  
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 44  
 (Years)  
 (12) BIRTHPLACE Greenville S. C.  
 (13) OCCUPATION Fanner  
 (20) Number of children born to mother, including present birth 4

**MOTHER.**  
 (14) NAME BEFORE MARRIAGE Ethel Vaughan  
 (15) PRESENT POSTOFFICE OF MOTHER Greer R 4  
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 34  
 (Years)  
 (18) BIRTHPLACE Greenville S. C.  
 (19) OCCUPATION Housewife  
 (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 Born alive at 8 P. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. A. White M.D.  
 (24) State whether Physician or Midwife Physician (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 22 is signed by mark)

(27) Filed 10 11 1919 (28) Local Registrar W. E. White M.D.

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.

Revised by Columbia, S. C.