

(1) PLACE OF BIRTH

County of Greenville
 Township of Greenville
 or
 Inc. Town of
 or
 City of

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

File No.—For State Registrar Only
26327

Registration District No. 2209A

Registered No. 287
 (For use of Local Registrar)

(No. 11 5th Woodside)
 If birth occurs in a hospital or other institution, give name of same instead of street and number.

(2) Full Name of Child Evelyn Harris If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL girl (4) Twin or Triplet? To be answered only in event of Twins or Triplets (5) Number in order of birth (6) Are Parents Married? yes (7) DATE OF BIRTH May 21, 1922
 (Name of month) (Day) (Year)

FATHER.

(8) FULL NAME Joe H. Harris

(9) PRESENT POSTOFFICE OF FATHER Greenville S.C.

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 41 (Years)

(12) BIRTHPLACE S.C.

(13) OCCUPATION Textile worker

(20) Number of children born to mother, including present birth 7

MOTHER.

(14) NAME BEFORE MARRIAGE Mary Reaves

(15) PRESENT POSTOFFICE OF MOTHER Greenville S.C.

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

(18) BIRTHPLACE S.C.

(19) OCCUPATION Domestic

(21) Number of children of this mother now living, including present birth 6

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 5 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Geo. J. Walker

(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 mark)

(27) Filed Aug 17, 1922 (28) A. J. M. M. M. 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.