

N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD. Mark the FIRST-BORN. No. 1. THE OTHER, No. 2, etc., in question 3.

(1) PLACE OF BIRTH

County of Greenville
 Township of Milliken
 OF
 Inc. Town of
 OF
 City of

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

2677

Registration District No. 207 Registered No. 4
 (For use of Local Registrar)

(2) Full Name of Child

Myrtle Key (If child is not yet named, make supplemental report as directed)
 (3) BOY OR GIRL Girl (4) Twin or Triplet? No (5) Number in order of birth 3 (6) Are Parents Married? Yes DATE OF BIRTH July 26, 1923
 (Name of Month) (Day) (Year)

FATHER
 (8) FULL NAME J. M. Key
 (9) PRESENT POSTOFFICE OR FATHER Clemson S.C.
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 27
 (Years)
 (12) BIRTHPLACE Clemson S.C.
 (13) OCCUPATION Farmer
 (20) Number of children born to mother, including present birth 3

MOTHER
 (14) NAME BEFORE MARRIAGE Sarah Weatherford
 (15) PRESENT POSTOFFICE OF MOTHER Clemson S.C.
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 21
 (Years)
 (18) BIRTHPLACE Clemson 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 St. 8 P. 7 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) H. H. [Signature]
 (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)
[Signature]
 (27) Filed July 28, 1923 (28) [Signature] 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.