

## (1) PLACE OF BIRTH

County of Greenville  
 Township of Chatham  
 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  
**30553**

Registration District No. 2213Registered No. 75-  
(For use of Local Registrar)

(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 Boy (4) Twin or Triplet? \_\_\_\_\_ (5) Number in order of birth: \_\_\_\_\_ (6) Are Parents Married? Yes (7) DATE OF BIRTH: Sept. 1, 1922  
 (Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Alis Benson Styles(9) PRESENT POSTOFFICE OF FATHER Travellers Rest R. 1.(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY: 32  
(Years)(12) BIRTHPLACE: Greenville S.C.(13) OCCUPATION: Farmer(20) Number of children born to mother, including present birth: 5

## MOTHER.

(14) NAME BEFORE MARRIAGE: Lura Lee Bell Thom(15) PRESENT POSTOFFICE OF MOTHER: Travellers Rest R. 1.(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY: 29  
(Years)(18) BIRTHPLACE: Greenville S.C.(19) OCCUPATION: Housewife(21) Number of children of this mother now living, including present birth: 5

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Alive at 1 P. M. on the date above stated.  
 (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) P. J. Grimes M.D.(24) State whether Physician or Midwife \_\_\_\_\_ (25) Address of Physician or Midwife Travellers Rest R. 1.

Given name added from a supplemental report:

(26) Witness: \_\_\_\_\_  
 (Signature of Witness necessary only when question 23 is signed by mark)(27) Signed Oct 9, 1922 Albert W. News  
 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.