

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

N. B.—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. McCaw, of Columbia.

(1) PLACE OF BIRTH **CERTIFICATE OF BIRTH**  
 County of Greenville STATE OF SOUTH CAROLINA,  
 Bureau of Vital Statistics  
 Township of Greenville State Board of Health  
 Inc. Town of ..... Registration District No. 2209 Registered No. 393  
 or ..... (For use of Local Registrar)  
 City of Durham (No. 23 Duke Ward .....)  
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

File No.—For State Registrar Only  
**72982**

(2) Full Name of Child Leonard Brainerd McClinton child is not yet named, make supplemental report as directed

(3) BOY OR GIRL <u>Boy</u>	(4) Twin or Triplet? <u>No</u> <small>To be answered only in case of twins or triplets</small>	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>8 2 16</u> <small>(Name of Month) (Day) (Year)</small>
FATHER.			MOTHER.	
(8) FULL NAME <u>W M Henry McIntyre</u>			(14) NAME BEFORE MARRIAGE <u>Lillie M Ross</u>	
(9) PRESENT POSTOFFICE OF FATHER <u>23 Duke Durham N.C.</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Home</u>	
(10) COLOR OR RACE <u>W</u>	(11) AGE AT LAST BIRTHDAY <u>23</u> <small>(Years)</small>	(16) COLOR OR RACE <u>W</u>	(17) AGE AT LAST BIRTHDAY <u>20</u> <small>(Years)</small>	
(12) BIRTHPLACE <u>N.C.</u>			(18) BIRTHPLACE <u>N.C.</u>	
(13) OCCUPATION <u>Cotton Mill</u>			(19) OCCUPATION <u>House</u>	
(20) Number of children born to mother, including present birth <u>1</u>			(21) Number of children of this mother now living, including present birth <u>1</u>	

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\***

(22) I hereby certify that I attended the birth of this child, who was born alive ..... M.,  
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)  
 (23) (Signature) John Hill  
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife  
Physician Greenville

Given name added from a supplemental report  
 ..... 191.....  
 Registrar

(26) Witness .....  
 (Signature of Witness necessary only when question 23 is signed by mark)  
 (27) Filed Aug 2 6 191..... (28) A H Mackay  
 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.