

(1) PLACE OF BIRTH

County of Greenville
 Township of Greenville
 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

2880

2209a

Registration District No.

Registered No.

(For use of Local Registrar)

(No. 104 N 10th at V St)

St. 1 Ward)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child

Lilva Terhude Baker

(If child is not yet named, make supplemental report as directed)

3 SEX OR
CHILDgirl4 Twin
or Triplet

To be answered only in event of Twin or Triplet

(5) Number in
order of birth(6) Are
Parents
MarriedYes(7) DATE OF
BIRTHSept 26 23

(Name of Month) (Day) (Year)

FATHER.

8 FULL
NAMEJames Lawrence Aiken9 PRESENT
POSTOFFICE
OF FATHERAtty Way Greenville SC(10) COLOR
OR
RACEwhite(11) AGE AT LAST
BIRTHDAY41

(12) BIRTHPLACE

Pickens Co SC

(13) OCCUPATION

Merchant

MOTHER

(14) NAME BEFORE
MARRIAGEEmmette Elizabeth Byrd(15) PRESENT
POSTOFFICE
OF MOTHERNone(16) COLOR
OR
RACEwhite(17) AGE AT LAST
BIRTHDAY43

(18) BIRTHPLACE

Pickens Co SC

(19) OCCUPATION

Housewife(20) Number of children born to
mother, including present birth8(21) Number of children of this mother
now living, including present birth7

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was
on the date above stated.born alive(23) at 5:15 A.M.
(Born alive or stillborn) (Hour A. M. or P. M.)

(24) (Signature)

Chas. J. Brown

(25) State whether Physician or Midwife

(26) Address of Physician or Midwife

1213 GreenvilleGiven name added from a supplement-
tal report

(27) Witness

(Signature of Witness necessary only
when question 23 is signed by mark)

(28) Filed

Sept 27 1923

(29)

A. H. Mackey
Local RegistrarWhen 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.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.