

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.

CITY OF COLUMBIA

## (1) PLACE OF BIRTH

County of GreenvilleTownship of Greenvilleor  
Inc. Town ofor  
City of

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

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

43011

Registration District No. 22.1.8 Registered No. 47

(For use of Local Registrar)

(2) Full Name of Child Mary Linnell

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 case of Twins or Triplets

(5) Number in order of birth

(6) Are Parents Married?

(7) DATE OF BIRTH

Oct. 28, 1915  
(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME

Edward Linnell

(9) PRESENT POSTOFFICE OF FATHER

Tigersville S.C.

(10) COLOR OR RACE

white

(11) AGE AT LAST BIRTHDAY

22  
(Years)

(12) BIRTHPLACE

Greenville co. S.C.

(13) OCCUPATION

mill operator

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

1

## MOTHER.

(14) NAME BEFORE MARRIAGE

Louise Linnell

(15) PRESENT POSTOFFICE OF MOTHER

Tigersville S.C.

(16) COLOR OR RACE

white

(17) AGE AT LAST BIRTHDAY

20  
(Years)

(18) BIRTHPLACE

T.C.

(19) OCCUPATION

Housewife

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

1

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was alive at 11 P.M. on the date above stated.  
(Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Mahinda Pittman

(24) State whether Physician or Midwife. (25) Address of Physician or Midwife

MidwifeTigersville S.C.

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 Dec 29, 1915(28) E. V. Phillips  
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.