

(1) PLACE OF BIRTH

County of Greenville

Township of Butler

or  
Inc. Town of

or  
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

Registration District No. 2202 Registered No. 4

(For use of Local Registrar)

(2) Full Name of Child. John Garritt

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 June 14, 1916  
(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Don't Know

(9) PRESENT POSTOFFICE OF FATHER Don't Know

(10) COLOR Suppose to be white (11) AGE AT LAST BIRTHDAY Don't Know  
(Years)

(12) BIRTHPLACE Don't Know

(13) OCCUPATION Don't Know

(20) Number of children born to mother, including present birth 1

## MOTHER.

(14) NAME BEFORE MARRIAGE Rosa Garritt

(15) PRESENT POSTOFFICE OF MOTHER Green A.C. #5

(16) COLOR Black (17) AGE AT LAST BIRTHDAY 18  
(Years)

(18) BIRTHPLACE Greenville Co

(19) OCCUPATION Farmer

(21) 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 Born at 7 P M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) R. F. M. Brown

(24) State whether Physician or Midwife (25) Address of Physician or Midwife Green A.C. #5

Given name added from a supplemental report

(26) Witness

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

(27) Filed 2/5/16 (28) T. A. Jones

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.

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W. D. McCraw, of Columbia, S. C.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the FIRST-BORN, No. 1. Then OTHER, No. 2, etc., in question 3.