(1) PLACE OF BIRTH

County of Greenville

Township of ...

or

Inc. Town of Pal Mill

or

City of Greenville (No. 26 ... Ward)

(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
28597

Registration District No. ... Registered No. 2209 A
(For use of Local Registrar)

(2) Full Name of Child Gwendolyn Monroe (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL Girl

(4) Twin or Triplet

(5) Number in order of birth
(To be answered only in event of Twins or Triplets)

(6) Are Parents Married? Yes

(7) DATE OF BIRTH Sept. 23 1923
(Name of Month) (Day) (Year)

FATHER	MOTHER
(8) FULL NAME Washington Ordie Monroe	(14) NAME BEFORE MARRIAGE Kate Rox Lee
(9) PRESENT POSTOFFICE OF FATHER Greenville S C 2675 Ave	(15) PRESENT POSTOFFICE OF MOTHER Same
(10) COLOR OR RACE W	(16) COLOR OR RACE W
(11) AGE AT LAST BIRTHDAY 44 (Years)	(17) AGE AT LAST BIRTHDAY 36 (Years)
(12) BIRTHPLACE N.C.	(18) BIRTHPLACE N.C.
(13) OCCUPATION Left the work	(19) OCCUPATION Housewife
(20) Number of children born to mother, including present birth	(21) Number of children of this mother now living, including present birth 6

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive (Born alive or Stillborn) at 10.45 A.M. (Hour A. M. or P. M.) on the date above stated.

(23) (Signature) O. G. Giles M.D.

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Greenville S C

Given name added from a supplemental report

..... 19 ....
Registrar

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

(27) Filed Sept 27 1923 (28) A. H. Mackey
Local Registrar.

*When there was no attending physician or midwife, then the father, householder, etc., should make this report. 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.