

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.

McCart, of Columbia.

(1) PLACE OF BIRTH

County of GreenvilleTownship of GreenvilleInc. Town of Greenvilleor GreenvilleCity of Greenville

(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

77300

(2) Full Name of Child.

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

(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH 9-7-1914
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME James M. Roberts(9) PRESENT POSTOFFICE OF FATHER Greenville, S.C.(10) COLOR OR RACE W (11) AGE AT LAST BIRTHDAY 25 (Years)(12) BIRTHPLACE S.C.(13) OCCUPATION Clerical work(20) Number of children born to mother, including present birth 7

MOTHER.

(14) NAME BEFORE MARRIAGE Linnie Springfield(15) PRESENT POSTOFFICE OF MOTHER Home(16) COLOR OR RACE W (17) AGE AT LAST BIRTHDAY 30 (Years)(18) BIRTHPLACE S.C.(19) OCCUPATION house(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 at 5 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) John A. 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 Sept 22 1914 (28) P. J. 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.

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