

1. PLACE OF BIRTH

County of Greenwood
 Township of 11 9611
 or
 Loc. Town of _____
 or
 City of _____

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

Registration District No. 23 | D

FILE No.—For State Registrar Only

44628

Registered No. _____

(For use of Local Registrar)

(No. _____)

St. _____

Ward _____

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

2. Full Name of Child

Elise Bernette Farmer

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

1. ~~BOY~~
GIRL

4. Twin or Triplet?

5. Number in order of birth

6. Age
Married?

7. DATE OF BIRTH

Oct. 8 1923
(Name of Month) (Day) (Year)

To be answered only in event of Twins or Triplets

FATHER

8. FULL NAME

Boy A. Farmer

9. PRESENT POSTOFFICE OF FATHER

Ninety Six, S.C.

10. COLOR OR RACE

White

11. AGE AT LAST BIRTHDAY

38 (Years)

12. BIRTHPLACE

Pickens, S.C.

13. OCCUPATION

Farmer

16. Number of children born to mother, including present birth

7

MOTHER

14. NAME BEFORE MARRIAGE

Rosa L. Parker

15. PRESENT POSTOFFICE OF MOTHER

Ninety Six, S.C.

16. COLOR OR RACE

White

17. AGE AT LAST BIRTHDAY

37 (Years)

18. BIRTHPLACE

Troy, S.C.

19. OCCUPATION

Farming

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 alive at 8 P.M.
 on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)

23. Signature

E. J. McElie

24. State whether Physician or Midwife

25. Address of Physician or Midwife

Greenwood, S.C.

Given name added from a supplemental report

26. Witness

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

27. Filed May 11 1924

28.

Local Registrar

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.

REPRODUCED FROM THE ORIGINAL RECORDS OF THE BUREAU OF VITAL STATISTICS, STATE OF SOUTH CAROLINA, 1923. THE OTHER SIDE OF THIS CARD IS RESERVED FOR THE RECORD OF THE BIRTH OF THE CHILD.