

MARGIN RESERVED FOR BINDING.

WRITE PLAINLY, WITH UNFADING INK.—THIS IS A PERMANENT RECORD.
 IN CASE OF TWINS OR TRIPLETS USE A SEPARATE BLANK FOR EACH CHILD, AND MARK THE FIRST-BORN. No. 1 THIS OTHER, No. 2, etc., in question 5.

(1) PLACE OF BIRTH
 County of Spartanburg
 Township of North Spring
 or Town of
 City of (No. St. Ward) (If birth occurs in a hospital or other institution, give name of same instead of street and number.)
 Registration District No. 407 No. 701 (For use of Local Registrar)

(2) Full Name of Child Ellen Ruth Wilburn If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Girl (4) Twin or Triplet? No (5) Number in order of birth 2 (6) Yes (7) DATE OF BIRTH Feb 1 23
 To be answered only in event of Twin or Triplet (Name of Month) (Day) (Year)

FATHER.		MOTHER.	
(8) FULL NAME <u>Arthur Lee Wilburn</u>	(14) NAME BEFORE MARRIAGE <u>Vida Moore</u>	(10) PRESENT POSTOFFICE OF FATHER <u>Greer SC</u>	(16) PRESENT POSTOFFICE OF MOTHER <u>Greer SC</u>
(10) COLOR OR RACE <u>White</u>	(11) AGE AT LAST BIRTHDAY <u>28</u> (Years)	(12) COLOR OR RACE <u>White</u>	(17) AGE AT LAST BIRTHDAY <u>32</u> (Years)
(12) BIRTHPLACE <u>Spartanburg Co</u>	(14) BIRTHPLACE <u>Spartanburg Co</u>	(16) OCCUPATION <u>Farming</u>	(18) OCCUPATION <u>Domestic</u>
(18) Number of children born to mother, including present birth <u>2</u>	(20) Number of children of this mother now living, including present birth <u>2</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was at on the date above stated. (Born alive or stillborn) (Hour, A. M. or P. M.)
 (23) (Signature) R L Marchant M D
 (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Greer SC

Given name added from a supplemental report
 (26) Witness (Signature of Witness necessary only when question 22 is signed by mark)
 (27) Filed Jan 14 1924 (28) J C Moore Local Registrar

*When there was no attending physician or midwife, then the father, household, etc., should make this report. If a child breathes even once, it must not be reported as stillborn. No report is desired of stillborns before the fifth month of pregnancy.