

(1) PLACE OF BIRTH

County of

Greenville

Township of

Inc. Town of

City of

Greenville

(2) Full Name of Child

Jack Harvelly Head

CERTIFICATE OF BIRTH
STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of Health

File No. - For State Registrar Only

3969

Registration District No.

22A

Registered No.

80

(For use of Local Registrar)

(No. 201 W. Stone Ave.)

Ward

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

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

To be answered only in event of Twin or Triplet

6) AGE

7) DATE OF BIRTH

Feb 24 23

(Month of Month) (Day) (Year)

8) FULL NAME

W. H. Head

9) PRESENT POSTOFFICE OF FATHER

Greenville S.C.

10) COLOR OR RACE

W.

11) AGE AT LAST BIRTHDAY

31

(Year)

12) BIRTHPLACE

S.C.

13) OCCUPATION

Fireman U.S.P.H.

14) NAME BEFORE MARRIAGE

Murtle Porter

15) PRESENT POSTOFFICE OF MOTHER

Greenville S.C.

16) COLOR OR RACE

W.

17) AGE AT LAST BIRTHDAY

21

(Year)

18) BIRTHPLACE

S.C.

19) OCCUPATION

Housewife

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

2

21) Number of children of this mother now living, including present birth

2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 10 A.M. on the date above stated.

(23) (Signature)

(24) State where

Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

(26) Witness

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

(27) Filed Feb 26 1923

(28) 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.

fifth month of pregnancy.

before the fifth month of pregnancy.