

MARGIN RESERVED FOR BINDING.  
WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.  
b. 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 3.  
McKaw, of Columbia.

Form No. 1.

(1) PLACE OF BIRTH

County of Greenville  
Township of Durham  
or  
Inc. Town of  
or  
City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.  
Bureau of Vital Statistics  
State Board of Health

File No.—For State Registrar Only

42995

Registration District No. 2205 Registered No. 863  
(For use of Local Registrar)  
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child. Georgeann Greer If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Girl (4) Twin or Triplet? X (5) Number in order of birth 7 (6) Are Parents Married? Yes (7) DATE OF BIRTH Feb 4 1918  
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Will Greer  
(9) PRESENT POSTOFFICE OF FATHER Durham  
(10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY 37 (Years)  
(12) BIRTHPLACE Columbia, S.C.  
(13) OCCUPATION Farm  
(14) Number of children born to mother, including present birth 7

MOTHER.

(15) NAME BEFORE MARRIAGE Georgeann Greer  
(16) PRESENT POSTOFFICE OF MOTHER Durham  
(17) COLOR OR RACE Black (18) AGE AT LAST BIRTHDAY 36 (Years)  
(19) BIRTHPLACE Columbia, S.C.  
(20) OCCUPATION Farm  
(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 at 11 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Dora Chapman

(24) State whether Physician or Midwife (25) Address of Physician or Midwife Durham, S.C.

Given name added from a supplemental report

1918

Registrar

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

(27) Filed 27 Jan 1918

(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.