

(1) PLACE OF BIRTH

County of Greenville...

Township of

or
Inc. Town ofor
City of

(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

90100

Registration District No. 2209Registered No. 584
(For use of Local Registrar)(2) Full Name of Child Loetta Virginia Bragg { If child is not yet named, make supplemental report as directed.

(3) BOY OR GIRL? <u>Girl</u>	(4) Twin or Triplet? <u>X</u> <small>To be answered only in case of Twins or Triplets</small>	(5) Number in order of birth <u>X</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Dec. 27th</u> 191 <u>6</u> (Name of Month) (Day) (Year)
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FATHER.

(8) FULL NAME Mr. Luther Alexander Bragg(9) PRESENT POSTOFFICE OF FATHER Greenville S.C.(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 30 (Years)(12) BIRTHPLACE Bliffton S.C.(13) OCCUPATION Mill operator(20) Number of children born to mother, including present birth { One (1)

MOTHER.

(14) NAME BEFORE MARRIAGE Miss. Alta Leland Agnor(15) PRESENT POSTOFFICE OF MOTHER Greenville S.C.(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 23 (Years)(18) BIRTHPLACE Colliers Town Va.(19) OCCUPATION Domestics(21) Number of children of this mother now living, including present birth { One (1)

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 8-10 A.M. on the date above stated. (Hour A.M. or P.M.)(23) (Signature) F. K. Tedbetter M.D.

(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 Dec 23 6 191..... (28) A H Mackey 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.

Registrar

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