

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 5.

(1) PLACE OF BIRTH
CERTIFICATE OF BIRTH
 STATE OF SOUTH CAROLINA
 Bureau of Vital Statistics
 State Board of Health

County of Greenville
 Township of Greenville
 or
 Inc. Town of Brandon Hill Registration District No. 2209A Registered No. 243
 or
 City of (No. 14 Bennett) 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 Mr Paul Sanders If child is not yet named, make supplemental report as directed

File No.—For State Registrar Only

22383

3) BOY OR GIRL? <u>Boy</u>	4) Twin or Triplet? To be answered only in event of Twins or Triplets	5) Number in order of birth	6) Are Parents Married? <u>Yes</u>	7) DATE OF BIRTH: <u>June 24</u> 19 <u>41</u> (Month) (Day) (Year)
FATHER. (8) FULL NAME <u>Jose Sanders</u> (9) PRESENT POSTOFFICE OF FATHER <u>Judson Hill Greenville</u> (10) COLOR OR RACE <u>W</u> (11) AGE AT LAST BIRTHDAY <u>23</u> (Years) (12) BIRTHPLACE <u>Greenville SC</u> (13) OCCUPATION <u>Police Worker</u>		MOTHER. (14) NAME BEFORE MARRIAGE <u>Agnes Ada Bell Hogan</u> (15) PRESENT POSTOFFICE OF MOTHER <u>Brandon Hill Greenville</u> (16) COLOR OR RACE <u>White</u> (17) AGE AT LAST BIRTHDAY <u>19</u> (Years) (18) BIRTHPLACE <u>Greenville SC</u> (19) OCCUPATION <u>Domestic</u> (20) Number of children born to mother, including present birth <u>1</u> (21) Number of children of this mother now living, including present birth <u>1</u>		

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 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)
 (23) (Signature) Chas. Kenner
 (24) State whether Physician or Midwife Midwife
 (25) Address of Physician or Midwife Greenville 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 Aug 9 1941 (28) A. J. Mackley 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.

(Date of)
 Registrar.

Filed 5-15-41 Mar 1941 D. Registrar.