

(1) PLACE OF BIRTH  
County of Greenville

Township of .....

OR  
Inc. Town of .....

OR  
City of Greenville

(No. .... St. .... Ward)  
(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

17738

Registration District No. 22A Registered No. 291

(For use of Local Registrar)

(2) Full Name of Child Baby Neal } 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 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH June, 17th, 1923  
(Name of Month) (Day) (Year)

FATHER

(8) FULL NAME John A. Neal

(9) PRESENT POSTOFFICE OF FATHER Greenville, S. C.

(10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 30  
(Years)

(12) BIRTHPLACE S. C.

(13) OCCUPATION Drayman

(20) Number of children born to mother, including present birth 2

MOTHER

(14) NAME BEFORE MARRIAGE Annie Bradley

(15) PRESENT POSTOFFICE OF MOTHER Greenville, S. C.

(16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 29  
(Years)

(18) BIRTHPLACE S. C.

(19) OCCUPATION Washerwoman

(21) Number of children of this mother now living, including present birth 7

#### CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 11:20 P. M. on the date above stated.  
(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Rosie Gearull  
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Greenville, S. C.

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 June 1, 1923 (28) R. L. Smith 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.

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