

MARGIN RESERVED FOR BINDING.

WHITE PLAIN. WITH LEADING INK—THIS IS A PERMANENT RECORD
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
County of Spartanburg
Township of
or
Inc. Town of Wayne SC
or
City of

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

File No.—For State Registrar Only
20229

Registration District No. 4008 Registered No. 253
(For use of Local Registrar)

(2) Full Name of Child Gregory — (If child is not yet named, make supplemental report as directed)

3) BOY OR GIRL? Girl 4) Twin or Triplet? 1 (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Apr 19 22
(Name of Month) (Day) (Year)

FATHER.
8) FULL NAME James W. Gregory
9) PRESENT POSTOFFICE OF FATHER Cowpens SC
10) COLOR OR RACE W (11) AGE AT LAST BIRTHDAY 27 (Years)
12) BIRTHPLACE SC
13) OCCUPATION Farmer
20) Number of children born to mother, including present birth One

MOTHER.
14) NAME BEFORE MARRIAGE Alada Morgan
15) PRESENT POSTOFFICE OF MOTHER Waynesville SC
16) COLOR OR RACE W (17) AGE AT LAST BIRTHDAY 22 (Years)
18) BIRTHPLACE N.C.
18) OCCUPATION H. W.
(21) Number of children of this mother now living, including present birth One

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was live at 7:30 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Arthur G. Conner
(24) State whether Physician or Midwife 1 (25) Address of Physician or Midwife Cowpens

Given name added from a supplemental report
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....., 19 ..
Registrar

(26) Witness
(Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed June 19 22 (28) W. W. Painter 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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