

(3) PLACE OF BIRTH

CERTIFICATE OF BIRTH

County of Greenville, S.C.

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

7076

Township of Piedmont, S.C.

Inc. Town of

Registration District No. 22, CRegistered No. 7  
(For use of Local Registrar)

OF

City of

(No.

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child, James H. Harrison

If child is not yet named, make supplemental report as directed

(1) BOY OR GIRL? Boy

(4) Twin or Triplet?

(5) Number in order of birth

to be entered only in case of twins or triplets

(6) Are Parents Married? yes(7) DATE OF BIRTH Feb 4 1923

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME John Harrison(9) PRESENT POSTOFFICE OF FATHER Piedmont, S.C.(10) COLOR OR RACE white(11) AGE AT LAST BIRTHDAY 33  
(Years)(12) BIRTHPLACE S.C.(13) OCCUPATION Salesman(14) Number of children born to mother, including present birth 4

MOTHER.

(14) NAME BEFORE MARRIAGE Lucy Finley(15) PRESENT POSTOFFICE OF MOTHER Piedmont, S.C.(16) COLOR OR RACE white(17) AGE AT LAST BIRTHDAY 27  
(Years)(18) BIRTHPLACE S.C.(19) OCCUPATION domestic(21) Number of children of this mother now living, including present birth 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 10-40 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) J. L. Bell

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Piedmont

Given name added from a supplemental report

(26) Witness

(Signature of Witness necessary only when question 22 is signed by mark)

(27) Filed Feb 9 1923(28) J. L. Bell Local Registrar

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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