

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.  
N. B.—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 Greenville  
Township of .....  
or  
Inc. Town of .....  
or  
City of Sancti Spiritus  
(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

18873

Registration District No. 2109B Registered No. 7285  
(For use of Local Registrar)

(No. Greenville St.; ..... Ward)

## (2) Full Name of Child Gracie Maria Mitchell If child is not yet named, make supplemental report as directed

3) BOY OR GIRL Boy 4) Twin or Triplet? ☒ 5) Number in order of birth 1 6) Are Parents Married? Yes 7) DATE OF BIRTH June 26 19 18  
To be answered only in case of Twins or Triplets

FATHER.  
8) FULL NAME Eugene Mitchell  
9) PRESENT POSTOFFICE OF FATHER Greenville, S.C.  
10) COLOR OR RACE white 11) AGE AT LAST BIRTHDAY 42 (Years)  
12) BIRTHPLACE Lancaster Co. S.C.  
13) OCCUPATION Dupl Electric Dept San Louis Co  
20) Number of children born to mother, including present birth 15

MOTHER.  
14) NAME BEFORE MARRIAGE Elizabeth Olivia Dodson (DODSON)  
15) PRESENT POSTOFFICE OF MOTHER Greenville, S.C.  
16) COLOR OR RACE white 17) AGE AT LAST BIRTHDAY 38 (Years)  
18) BIRTHPLACE Albermarle Co. S.C.  
19) OCCUPATION Domestic  
21) Number of children of this mother now living, including present birth 15

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

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

(23) (Signature) R. C. Bruce (24) State Physician (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 June 26 19 18 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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RECAP OF COLUMBIA, COLUMBIA, G. C.

RECAP