

N. H.—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 C S
 or
 Inc. Town of.....
 or
 City of..... (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
18774

Registration District No. 2204 Registered No. 78
 (For use of Local Registrar)

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

(3) BOY OR GIRL <u>Male</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>May 4, 1922</u> (Name of Month) (Day) (Year)
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FATHER.	MOTHER.
(8) FULL NAME <u>William Boyce Duncan</u>	(14) NAME BEFORE MARRIAGE <u>Carrie Adkins</u>
(9) PRESENT POSTOFFICE OF FATHER <u>Greenville</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Greenville</u>
(10) COLOR OR RACE <u>W</u>	(16) COLOR OR RACE <u>W</u>
(11) AGE AT LAST BIRTHDAY <u>26</u> (Years)	(17) AGE AT LAST BIRTHDAY <u>26</u> (Years)
(12) BIRTHPLACE <u>Greenville</u>	(18) BIRTHPLACE <u>Laurens</u>
(13) OCCUPATION <u>Textile</u>	(19) OCCUPATION <u>Domestic</u>
(20) Number of children born to mother, including present birth <u>Four</u>	(21) Number of children of this mother now living, including present birth <u>Three</u>

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 9:20 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Thurman Waller
 (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Greenville

Given name added from a supplemental report.....

(26) Witness.....
 (Signature of Witness necessary only when question 23 is signed by mark)

..... 19 22 Registrar W. H. Moore
 (27) Filed 6-21 19 22 (28) W. H. Moore 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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MCGRAW OF COLUMBIA, COLUMBIA, S. C.