

(1) PLACE OF BIRTH
 County of Greenville
 Township of
 or
 Inc. Town of
 or
 City of Greenville
 (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

18742

Registration District No. 22A Registered No. 315
 (For use of Local Registrar)
 (No. 226 Choice St. St.; 4th Ward)

(2) Full Name of Child Ruth Kathleen Pruett
 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 4th (6) Are Parents Married? Yes (7) DATE OF BIRTH June 5 1922
 (Name of Month) (Day) (Year)

FATHER.		MOTHER.	
(8) FULL NAME <u>George Hovay Pruett</u>	(14) NAME BEFORE MARRIAGE <u>Florence Lark</u>	(9) PRESENT POSTOFFICE OF FATHER <u>Greenville S.C. 226 Choice St.</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Same</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>22</u> (Years)
(12) BIRTHPLACE <u>S.C.</u>	(18) BIRTHPLACE <u>S.C.</u>	(13) OCCUPATION <u>Tex. Ale worker</u>	(19) OCCUPATION <u>Housewife</u>
(20) Number of children born to mother, including present birth <u>3</u>	(21) Number of children of this mother now living, including present birth <u>3</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was 3 years old at birth, on the date above stated. (Born alive or stillborn Hour 1:25 M. or P. M.)

(23) (Signature) C. J. Lark
 (24) State whether Physician or Midwife 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 July 7 1922 (28) C. E. 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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