

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.
 E. J. McCaw, of Columbia

(1) PLACE OF BIRTH
 County of Greenville STATE OF SOUTH CAROLINA.
 Township of Chickadee Bureau of Vital Statistics
 or Town of State Board of Health
 or
 City of Greenville Registration District No. 2204 Registered No. 114
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.) (For use of Local Registrar)

File No.—For State Registrar Only
4332

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

(3) BOY OR GIRL <u>Boy</u>	(4) Twin or Triplet? <u>No</u> <small>Is he entered only in case of Twins or Triplets</small>	(5) Number in order of birth <u>33</u>	(6) Are Parents Married? <u>No</u>	(7) DATE OF BIRTH <u>1916</u> <small>(Name of Month) (Day) (Year)</small>
FATHER			MOTHER	
(8) FULL NAME <u>W.P. Gilliard</u>			(14) NAME BEFORE MARRIAGE <u>W. L. Moore</u>	
(9) PRESENT POSTOFFICE OF FATHER <u>Greenville, S.C. #4</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Greenville, S.C. #4</u>	
(10) COLOR OR RACE <u>colored</u>	(11) AGE AT LAST BIRTHDAY <u>33</u> <small>(Years)</small>	(16) COLOR OR RACE <u>colored</u>	(17) AGE AT LAST BIRTHDAY <u>26</u> <small>(Years)</small>	
(12) BIRTHPLACE <u>Greenville Springs</u>		(18) BIRTHPLACE <u>Travler's Post</u>		
(13) OCCUPATION <u>farmer</u>		(19) OCCUPATION <u>farmer</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 mid wife 30 doth (Born alive or stillborn) M.,
 on the date above stated. (Hour A. M. or P. M.)
 (23) (Signature) mid wife greene R # 4
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report
June 8 1916
E. J. McCaw Registrar
 (26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
 (27) Filed 1-8 1916 (28) E. J. McCaw 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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