

(1) PLACE OF BIRTH

County of Greenville
 Township of Chickadee
 or
 Inc. Town of Greenville
 or
 City of Greenville

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
 Bureau of Vital Statistics
 State Board of Health

File No.—For State Registrar Only

42612 10052

Registration District No. 27. BRegistered No. 51
(For use of Local Registrar)

City of Greenville (No. 27. B St. 51 Ward 51)
 If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Law Wm Fuller 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 23 (6) Are Parents Married? yes (7) DATE OF BIRTH Dec 4 19 22
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Wm Fuller
 (9) PRESENT POSTOFFICE OF FATHER Greenville
 (10) COLOR OR RACE col (11) AGE AT LAST BIRTHDAY 23 (Years)
 (12) BIRTHPLACE SC
 (13) OCCUPATION farmer
 (20) Number of children born to mother, including present birth three

MOTHER.

(14) NAME BEFORE MARRIAGE Alice Fuller
 (15) PRESENT POSTOFFICE OF MOTHER Greenville
 (16) COLOR OR RACE col (17) AGE AT LAST BIRTHDAY 22 (Years)
 (18) BIRTHPLACE SC
 (19) OCCUPATION house work
 (21) Number of children of this mother now living, including present birth two

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 5:00 M., on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)

(23) (Signature) Alice Alexandra
 (24) State whether Physician or Midwife midwife (25) Address of Physician or Midwife Greenville

Given name added from a supplemental report

(26) Witness Jan 10 1923 (Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed Jan 10 1923 (28) Q. W. G. Evans 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.