

(1) PLACE OF BIRTH

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

File No.—For State Registrar Only
50432

County of Spartanburg
Township of Beech Springs
OR
Inc. Town of
OR
City of

Registration District No. 00045 Registered No. B.B.
(For use of Local Registrar)
City of (No. St. Ward)
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child James Albert Green { 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 Feb 28 1916
To be answered only in case of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME William Green
(9) PRESENT POSTOFFICE OF FATHER Greer
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 27 (Years)
(12) BIRTHPLACE Greenville Co
(13) OCCUPATION Farming
(20) Number of children born to mother, including present birth { 1

MOTHER.
(14) NAME BEFORE MARRIAGE Flora E Johnson
(15) PRESENT POSTOFFICE OF MOTHER Greer
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 23 (Years)
(18) BIRTHPLACE Spartanburg Co
(19) OCCUPATION House work
(21) Number of children of this mother now living, including present birth { 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was at 11 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) W. W. ...

(24) State whether Physician or Midwife (25) Address of Physician or Midwife Greer S.C.

Given name added from a supplemental report
..... 191.....
.....
Registrar

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

(27) Filed Feb 28 1916 (28) J. B. ... 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.

Registrar I LOCAL REGISTRAR

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THIS IS A PUBLIC RECORD AND IS AVAILABLE TO THE PUBLIC AT ALL TIMES. THE STATE OF SOUTH CAROLINA, DEPARTMENT OF HEALTH, BUREAU OF VITAL STATISTICS, COLUMBIA, SOUTH CAROLINA.