

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.

(1) PLACE OF BIRTH

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

File No.—For State Registrar Only
12597

County of Wicken
 Township of Hammond
 OF
 Inc. Town of
 OF
 City of

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

(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 Dennis 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 (6) Are Parents Married? Yes (7) DATE OF BIRTH March 25
 To be answered only in case of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

MOTHER.

(8) FULL NAME Will Green
 (9) PRESENT POSTOFFICE OF FATHER Charwater, S. C.
 (10) COLOR OR RACE W. (11) AGE AT LAST BIRTHDAY 40 (Years)
 (12) BIRTHPLACE Wicken Co.
 (13) OCCUPATION Will Hand
 (20) Number of children born to mother, including present birth 7

(14) NAME BEFORE MARRIAGE Rosa Treasler
 (15) PRESENT POSTOFFICE OF MOTHER Charwater, S. C.
 (16) COLOR OR RACE W. (17) AGE AT LAST BIRTHDAY 36 (Years)
 (18) BIRTHPLACE Wicken Co.
 (19) OCCUPATION Domestic
 (21) Number of children of this mother now living, including present birth 7

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) J. I. Greene M. D. (24) State whether Physician or Midwife (25) Address of Physician or Midwife Physician Charwater S. C.

Given and added from a supplemental report

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

L. N. Miller 19 .. Registrar

(27) Filed June 18 1923 (28) J. I. Greene M. D. 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.