

MARGIN RESERVED FOR BINDING.
 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 85717	
County of	Greenville				
Township of	Registration District No. 22..A.. Registered No. 472..... (For use of Local Registrar)			
Inc. Town of	City of Greenville (No. 30 Pinehney..... St.; 1st..... Ward) (If birth occurs in a hospital or other institution, give name of same instead of street and number.)			
(2) Full Name of Child			Caroline Rebecca Christopher --- { If child is not yet named, make supplemental report as directed		
(3) BOY OR GIRL?	(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parents Married?	(7) DATE OF BIRTH	
Girl	To be answered only in event of Twins or Triplets		Yes	Oct. 28, 1916 (Name of Month) (Day) (Year)	
FATHER.			MOTHER.		
(8) FULL NAME	John R. Christopher		(14) NAME BEFORE MARRIAGE	Ruth Wells	
(9) PRESENT POSTOFFICE OF FATHER	30 Pinehney St. Greenville, S.C.		(15) PRESENT POSTOFFICE OF MOTHER	30 Pinehney St. City.	
(10) COLOR OR RACE	(11) AGE AT LAST BIRTHDAY	White 31 (Years)	(16) COLOR OR RACE	(17) AGE AT LAST BIRTHDAY	White 27 (Years)
(12) BIRTHPLACE	Pickens Co		(18) BIRTHPLACE	Shelby, N.C.	
(13) OCCUPATION	Book keeper		(19) OCCUPATION	House wife	
(20) Number of children born to mother, including present birth	2		(21) Number of children of this mother now living, including present birth	2	
CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*					
(22) I hereby certify that I attended the birth of this child, who was born alive..... at 9:30 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)					
(23) (Signature)		J. Anderson		(25) Address of Physician or Midwife	
(24) State whether Physician or Midwife		M.D.		Greenville, S.C.	
Given name added from a supplemental report			(26) Witness		
.....			(Signature of Witness necessary only when question 23 is signed by mark)		
..... 19..... Registrar			(27) Filed Dec 4, 1916. (28) C. O. 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.