

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 8.

(1) PLACE OF BIRTH  
 County Greenville  
 Township Greenville  
 or  
 Inc. Town of ..... Registration District No. 2-2091 Registered No. 541  
 or  
 City of St. Rose Home (For use of Local Registrar)  
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

File No.—For State Registrar Only  
**85824**

(2) Full Name of Child Gene Marie { If child is not yet named, make supplemental report as directed

3) BOY OR GIRL? F (4) Twin or Triplet? ..... (5) Number in order of birth ..... (6) Are Parents Married? No (7) DATE OF BIRTH Nov 18 6  
Is to be answered only in case of twins & triplets. (Name of Month) (Day) (Year)

FATHER.

8) FULL NAME .....  
 9) PRESENT POSTOFFICE OF FATHER .....  
 10) COLOR OR RACE ..... (11) AGE AT LAST BIRTHDAY ..... (Years)  
 12) BIRTHPLACE .....  
 13) OCCUPATION .....  
 14) Number of children born to mother, including present birth { 2 .....

MOTHER.

14) NAME BEFORE MARRIAGE Margaret Morris  
 15) PRESENT POSTOFFICE OF MOTHER Greenville S.C.  
 16) COLOR OR RACE W (17) AGE AT LAST BIRTHDAY 21  
 18) BIRTHPLACE Connettsville S.C.  
 19) OCCUPATION Nurse  
 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 on the date above stated. (Hour A. M. or P. M.) 9:30 A.  
 (23) (Signature) H. M. Sarwith  
 (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Greenville

Given name added from a supplemental report  
7-8-1917  
M. B. Wood Registrar  
 (26) Witness ..... (Signature of Witness necessary only when question 23 is signed by mark)  
 (27) Filed Nov 30 1917 (28) A. J. Mackey 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.