

(1) PLACE OF BIRTH

County of GreenvilleTownship of GreeneOR
Inc. Town ofOR
City of

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No. — For State Registrar Only
56080Registration District No. 2210Registered No. 20

(For use of Local Registrar)

(2) Full Name of Child Jessie Arnold

If child is not yet named, attach supplemental report as directed

(1) BOY OR GIRL? <u>boy</u>	(4) Twin or Triplet? <u>No</u>	(5) Number in order of birth <u>1</u>	(6) Are <u>Yes</u> Parents Married?	(7) DATE OF BIRTH <u>April 15</u>
(Name of Month) (Day) (Year)				

FATHER.

(8) FULL NAME Willie Arnold(9) PRESENT POSTOFFICE OF FATHER Greenville # 6(10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 32 (Years)(12) BIRTHPLACE Greenville Co(13) OCCUPATION Farmer(14) Number of children born to mother, including present birth 7

MOTHER.

(14) NAME BEFORE MARRIAGE Jessie Goldsmith(15) PRESENT POSTOFFICE OF MOTHER Greenville # 6(16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 29 (Years)(18) BIRTHPLACE Greenville(19) OCCUPATION Housewife(20) Number of children of this mother now living, including present birth 7

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(21) I hereby certify that I attended the birth of this child, who was Alive at 10 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(22) (Signature) Nellie Pearson(23) State whether Physician or Midwife (24) Address of Physician or Midwife # 3 Piedmont

Give name added from a supplemental report

(25) Witness (Signature of Witness necessary only when question 22 is signed by mark)

(26) Dated May 4 1916 (27) S. B. Smith Local Registrar

When there was no attending physician or midwife, then the father, householder, etc., should sign this return. If a child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths during the fifth month of pregnancy.

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 2.
McGraw-Hill, Inc., New York, N. Y.