CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only
88688

(1) PLACE OF BIRTH County of Charleston
Township of .....
or Town of .....
or City of .....

Registration District No. 9A Registered No. 1 May
(For use of Local Reistrar)

(No. Roper Hospital 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 ... Willie Greene ... 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 (To be answered only in event of Twins or Triplets) | (6) Are Parents Married? No | (7) DATE OF BIRTH Dec. 1, 1916 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Frank Lagore
(9) PRESENT POSTOFFICE OF FATHER 124 Todd St. Charleston S.C.
(10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY D.K. (Years)
(12) BIRTHPLACE South Carolina
(13) OCCUPATION Laborer
(14) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Viola Greene
(15) PRESENT POSTOFFICE OF MOTHER 36 Todd.
(16) COLOR OR RACE Colored. (17) AGE AT LAST BIRTHDAY 17 (Years)
(18) BIRTHPLACE South Carolina
(19) OCCUPATION Domestic
(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 alive (born alive or stillborn) at 1.15 A.M. (Hour A. M. or P. M.) on the date above stated.

(23) (Signature) Thos. C. Betts M.D.
(24) State whether Physician or Midwife Phys.
(25) Address of Physician or Midwife Roper Hospital

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

(27) Filed 12/5 1916 (28) J. Moreau Green M.D. Local Registrar.

(29) Name added from a supplemental report ....., 191....
..... Registrar

*If 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.

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