CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only: 42598

(1) PLACE OF BIRTH

County of .....

Township of .....
or
Inc. Town of .....
or
City of Greenville S. C. (No. City Hospital St.; ..... Ward)

Registration District No. 22A Registered No. 666
(For use of Local Registrar)

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

(2) Full Name of Child Eugene Taylor Black (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
	To be answered only in event of Twins or Triplets		Yes	Dec. 1 (Name of Month) (Day) 1922 (Year)

FATHER

(8) FULL NAME J. C. Black.

(9) PRESENT POSTOFFICE OF FATHER Greenville S. C.

(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 35 (Years)

(12) BIRTHPLACE Greenville S. C.

(13) OCCUPATION Ry Clerk.

(20) Number of children born to mother, including present birth 3 Child

MOTHER

(14) NAME BEFORE MARRIAGE Jennie Taylor

(15) PRESENT POSTOFFICE OF MOTHER Greenville S. C.

(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 25 (Years)

(18) BIRTHPLACE Greenville S. C.

(19) OCCUPATION Housewife

(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 alive at ..... M.,
(Born alive or stillborn) (Hour A. M. or P. M.)
on the date above stated.

(23) (Signature) Chas Bell

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

..... 19 .....
Registrar

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

(27) Filed Jan 10 1923 (28) C. E. 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.