

(1) PLACE OF BIRTH

County of GreenvilleTownship of 11

or

Inc. Town of 2209

or

City of 599

(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
90114Registration District No. 2209 Registered No. 599

(For use of Local Registrar)

(2) Full Name of Child Marrin Allison Smith

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

(3) SEX OR

Boy

(4) Twin or Triplet?

(5) Number in order of birth

To be answered only in case of twins or triplets

(6) Are Parents Married?

Yes

(7) DATE OF BIRTH

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

John T. Smith

(9) PRESENT POSTOFFICE OF FATHER

8 Bennett StBrandon Mill

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

31

(Years)

(12) BIRTHPLACE

Dunderson Co. AL

(13) OCCUPATION

Wearer Cotton Mill

MOTHER.

(14) NAME BEFORE MARRIAGE

Miss G. L. White

(15) PRESENT POSTOFFICE OF MOTHER

9

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

29

(Years)

(18) BIRTHPLACE

GA

(19) OCCUPATION

Housekeeper

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

{

6

(21) Number of children of this mother now living, including present birth

{

4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born at 620 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

(26) Witness

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

(27) Filed

191

(28)

Local Registrar

Given name added from a supplemental report

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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.

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