

(1) PLACE OF BIRTH  
 County of Greenville  
 Township of Bates  
 or  
 Loc. Town of \_\_\_\_\_  
 or  
 City of \_\_\_\_\_

# CERTIFICATE OF BIRTH

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

File No. For State Registrar Only  
85765

Registration District No. 224 Registered No. 71  
 (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 Ethell Mary Taylor If child is not yet named, make supplemental report as directed

(3) Girl (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? (7) DATE OF BIRTH Oct. 26, 1916  
 (Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Charles Clyde Talley

(9) PRESENT POSTOFFICE OF FATHER Travellers Rest

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 27 (Years)

(12) BIRTHPLACE Florida

(13) OCCUPATION Farming

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

## MOTHER.

(14) NAME BEFORE MARRIAGE Louphine Hood

(15) PRESENT POSTOFFICE OF MOTHER Travellers Rest S.C.

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 23 (Years)

(18) BIRTHPLACE Sumner S.C.

(19) OCCUPATION Nurse

(20) Number of children of this mother now living, including present birth 13

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 3 P. M. on the date above stated. (Born alive or stillborn) (Hour) (P. M.)

(23) (Signature) W. E. C. Hood

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

Given name added from a supplemental report

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

(27) Filed md 1916 (28) W. E. C. Hood 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 rep. is desired of stillbirths before the fourth month of pregnancy.

MARGIN RESERVED FOR BINDING.  
 WRITE PLAINLY, WITH UNFADING INK.—THIS IS A PERMANENT RECORD.  
 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 5.

McGraw-Hill