

Form No. 1

(1) PLACE OF BIRTH

County of Greenwood
 Township of Knarks
 or
 Inc. 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

42843

Registration District No. 2308Registered No. 20
(For use of Local Registrar)

City of (No. 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 Elmo Hart { If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Oct 30, 1922
 (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME Elbert Hart
 (9) PRESENT POSTOFFICE OF FATHER "96" S.C.
 (10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 28 (Years)
 (12) BIRTHPLACE "96" S.C.
 (13) OCCUPATION Farming
 (20) Number of children born to mother, including present birth 5

MOTHER.
 (14) NAME BEFORE MARRIAGE Eloy Cook
 (15) PRESENT POSTOFFICE OF MOTHER "96" S.C.
 (16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 25 (Years)
 (18) BIRTHPLACE "96" S.C.
 (19) OCCUPATION Housewife
 (21) Number of children of this mother now living, including present birth 5

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) Ella Green(24) State whether Physician or Midwife Midwife(25) Address of Physician or Midwife "96" S.C.

Given name added from a supplemental report

(26) Witness Louise B. Barry
(Signature of Witness necessary only when question 23 is signed by mark)(27) Filed Jan. 10, 1923 (28) Louise B. Barry 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.