

(1) PLACE OF BIRTH

County of Spartanburg
 Township of Greenville
 or
 Inc. Town of Greenville
 or
 City of Greenville

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

79257

Registration District No. 403Registered No. 81
(For use of Local Registrar)

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

(2) Full Name of Child

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) Age
Parents
Married(7) DATE OF
BIRTH

Sept. 2, 1916
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Marvin J. Gillispie(9) PRESENT
POSTOFFICE
OF FATHERGreenville, S.C.(10) COLOR
OR
RACEWhite(11) AGE AT LAST
BIRTHDAY 26
(Years)

(12) BIRTHPLACE

Greenville, S.C.

(13) OCCUPATION

Farmer(20) Number of children born to
mother, including present birth2

MOTHER.

(14) NAME BEFORE
MARRIAGEElizabeth Ann Gammie(15) PRESENT
POSTOFFICE
OF MOTHERGreenville, S.C.(16) COLOR
OR
RACEWhite(17) AGE AT LAST
BIRTHDAY 24
(Years)

(18) BIRTHPLACE

Spartanburg Co. S.C.

(19) OCCUPATION

Housewife(21) Number of children of this mother
now living, including present birth1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born at 4:15 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

Given name added from a supplement-
 al report

Mrs. P. Leserne5-27-4719
Registrar

(26) Witness

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

(27) Filed

Sept. 2, 1916

(28)

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.

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