

McCook of Columbia.
FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.
CHILDREN OR TRIPLETS use a SEPARATE BLANK for each child, and mark the

(1) PLACE OF BIRTH
County of Greenville
Township of Butler
or
Inc. Town of Registration District No. 2702 Registered No. 50
or
City of (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 { If child is not yet named, make supplemental report as directed

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

File No.—For State Registrar Only
64492

(3) BOY OR GIRL? <u>Girl</u>	(4) Twin or Triplet? <u>No</u>	(5) Number in order of birth <u>1st</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>June 22, 1916</u> (Name of Month) (Day) (Year)
FATHER.			MOTHER.	
(8) FULL NAME <u>Emanuel Jordan Green</u>			(14) NAME BEFORE MARRIAGE <u>Hermietta Howell</u>	
(9) PRESENT POSTOFFICE OF FATHER <u>Taylor's S.C. R#2</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Taylor's S.C. R#2</u>	
(10) COLOR OR RACE <u>White</u>	(11) AGE AT LAST BIRTHDAY <u>39</u> (Years)	(16) COLOR OR RACE <u>White</u> (17) AGE AT LAST BIRTHDAY <u>43</u> (Years)		
(12) BIRTHPLACE <u>Greenville Co.</u>		(18) BIRTHPLACE <u>R.C.</u>		
(13) OCCUPATION <u>Merchant</u>		(19) OCCUPATION <u>Housewife</u>		
(20) Number of children born to mother, including present birth { <u>7</u> }		(21) Number of children of this mother now living, including present birth { <u>7</u> }		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born at 1:00 P.M. on the date above stated.
(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) H. White
(24) State whether Physician or Midwife (25) Address of Physician or Midwife Greenville S.C. R#2

Given name added from a supplemental report 191.....
..... Registrar

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

(27) Filed July 9, 1916 (28) W. E. White 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.