

(1) PLACE OF BIRTH

County of Greenwood
 Township of Greenwood
 or
 Inc. Town of Greenwood
 or
 City of Greenwood

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

File No.—For State Registrar Only

42824

Registration District No. 2304 Registered No. 169
 (For use of Local Registrar)

(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 Eugene Curtis League 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 5 (6) Are Parents Married? yes (7) DATE OF BIRTH 9-13-22
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME Jessie Leodine League
 (9) PRESENT POSTOFFICE OF FATHER So Greenwood S.C.
 (10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 41 (Years)
 (12) BIRTHPLACE Sum Co
 (13) OCCUPATION Mill operator
 (20) Number of children born to mother, including present birth 5

MOTHER.
 (14) NAME BEFORE MARRIAGE Hattie Mauer
 (15) PRESENT POSTOFFICE OF MOTHER Greenwood S.C.
 (16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 4 (Years)
 (18) BIRTHPLACE Hornsham Co Ga
 (19) OCCUPATION Housewife
 (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 H. A., M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) R. M. Fuller(24) State whether Physician or Midwife Phys(25) Address of Physician or Midwife Greenwood S.C.

Given name added from a supplemental report

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

(27) Filed Jan 10, 19 22 (28) S. S. Brooks
 Registrar 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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