

County of GreenvilleSTATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of Health

File No. — For State Registrar Only

Township of

or
Inc. Town of PiedmontRegistration District No. 2.2 Registered No. 28476
(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 Sallie M. M^c Coughlin If child is not yet named, make supplemental report as directed

(1) BOY OR GIRL? <u>Girl</u>	(4) Twin or Triplet? <u>No</u> <small>To be marked only in case of Twin or Triplet</small>	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Apr. 14 23</u> <small>(Name of Month) (Day) (Year)</small>
FATHER		MOTHER		
(8) FULL NAME <u>Monte M^c Coughlin</u>	(14) NAME BEFORE MARRIAGE <u>Sallie Kelly</u>			
(9) PRESENT POSTOFFICE OF FATHER <u>Piedmont S.C.</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Piedmont S.C.</u>			
(10) COLOR OR RACE <u>Cul</u>	(11) AGE AT LAST BIRTHDAY <u>24</u> <small>(Years)</small>	(16) COLOR OR RACE <u>Cul</u>	(17) AGE AT LAST BIRTHDAY <u>35</u> <small>(Years)</small>	
(12) BIRTHPLACE <u>S.C.</u>	(18) BIRTHPLACE <u>S.C.</u>			
(13) OCCUPATION <u>Labor</u>	(19) OCCUPATION <u>Jewelry</u>			
(20) Number of children born to mother, including present birth <u>4</u>	(21) Number of children of this mother now living, including present birth <u>4</u>			

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born at 12/10 A.M.
on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)(23) (Signature) Dr. E. M. M. M.
(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 22 is signed by mark)
(27) Date Apr. 23 1923 (28) L. L. G. G. 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.

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.