

(1) PLACE OF BIRTH

County of AndersonTownship of Brushy Creekor
Inc. Town of

City of

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

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

71248

Registration District No.

Registered No. 82

(For use of Local Registrar)

(2) Full Name of Child Carl Jerome Ellenburg

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) Are
Parents
Married? yes(7) DATE OF
BIRTH

(Name of month) (Day) (Year)

FATHER.

MOTHER.

(8) FULL
NAMEWilliam Franklin Ellenburg(14) NAME BEFORE
MARRIAGEUna Wilson(9) PRESENT
POSTOFFICE
OF FATHEREasley S.C.(15) PRESENT
POSTOFFICE
OF MOTHEREasley S.C.(10) COLOR
OR
RACEWhite(11) AGE AT LAST
BIRTHDAY44
(Years)(16) COLOR
OR
RACEWhite(17) AGE AT LAST
BIRTHDAY27
(Years)

(12) BIRTHPLACE

Greenwood Co. S.C.

(18) BIRTHPLACE

Transylvania Co. N.C.

(13) OCCUPATION

Farming

(19) OCCUPATION

Housewife(20) Number of children born to
mother, including present birth5(21) Number of children of this mother
now living, including present birth5

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive 8 A M.,
on the date above stated. (Born alive or stillborn) (Hour, M. or P. M.)

(23) (Signature)

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Physician Easley S.C. R.D. #5.Given name added from a supplement-
tal report

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Registrar

(26) Witness

(Signature of Witness necessary only
when question 23 is signed by mark)(27) Filed Sept 16 1916

(28)

W. T. Watson
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.a child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before the
fifth month of pregnancy.

MARGIN RESERVED FOR BINDING

MARGIN RESERVED FOR BINDING. WITH UNFOLDING LINE—THIS IS A PERMANENT RECORD. IN CASE OF TWIN OR TRIPLETS, USE A SEPARATE BLANK FOR EACH CHILD. FIRST-BORN OF COLUMBIA