

WRITE PLAINLY, WITH UNFADING INK—THIS IS A SEPARATE BLANK FOR EACH CHILD, AND MARK THE
 N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, AND MARK THE
 FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

CERTIFICATE OF BIRTH

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

(1) PLACE OF BIRTH
 County of Greenville
 Township of H. Island
 or
 Inc. Town of
 or
 City of (No. St.; Ward).
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

File No.—For State Registrar Only
85860

Registered No. 2211
 (For use of Local Registrar)

(2) Full Name of Child Landon Earl Sloan

(3) BOY OR GIRL? boy (4) Twin or Triplet? 1 (5) Number in order of birth 4 (6) Are Parents Married? yes (7) DATE OF BIRTH Mar, 1 6
To be answered only in case of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME George Sloan

(9) PRESENT POSTOFFICE OF FATHER Green # 2

(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 66 (Years)

(12) BIRTHPLACE So Car

(13) OCCUPATION Farming

(20) Number of children born to mother, including present birth 4

MOTHER.

(14) NAME BEFORE MARRIAGE Gelia Sloan

(15) PRESENT POSTOFFICE OF MOTHER Green # 2

(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 24 (Years)

(18) BIRTHPLACE North Carolina

(19) OCCUPATION House wife

(21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Alive, at 2-40 A. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Thomas Earl Mansour

(24) State whether Physician or Midwife (25) Address of Physician or Midwife P.O. Campbells

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 1-15-1916 (28) J. A. Lindsey 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.