

Form No. 1

(1) PLACE OF BIRTH

County of EdgewoodTownship of Manning

or

Inc. Town of

or

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

34101

Registration District No. 1605Registered No. 64

(For use of Local Registrar)

(2) Full Name of Child

Magbelle Manning

If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL

Girl

(4) Twin or Triplet?

No

(5) Number in order of birth

1

(6) Are Parents Married?

Yes

DATE OF BIRTH

Sept 8, 1922

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

John Will Beltra

(9) PRESENT POSTOFFICE OF FATHER

Dillon R-3

(10) COLOR OR RACE

Colored

(11) AGE AT LAST BIRTHDAY

20
(Years)

(12) BIRTHPLACE

Dillon Co

(13) OCCUPATION

Farming

MOTHER.

(14) NAME BEFORE MARRIAGE

Magbelle Manning

(15) PRESENT POSTOFFICE OF MOTHER

Dillon R-3

(16) COLOR OR RACE

Colored

(17) AGE AT LAST BIRTHDAY

20
(Years)

(18) BIRTHPLACE

Dillon Co

(19) OCCUPATION

Farm work

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

1

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

1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Born live at 4 A.M. on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)

(23) (Signature)

Emmanuel Manning

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

midwifeDillon R-3

Given name added from a supplemental report

(26) Witness

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

(27) Filed

Oct 23, 1922

(28) Local Registrar

St. Williams

*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.