

## (1) PLACE OF BIRTH

County of ShenandoahTownship of ShenandoahInc. Town of ShenandoahCity of Shenandoah

(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 HealthRegistration District No. 110019 Neighbored No. 1

(For use of Local Registrar)

(2) Full Name of Child Annun Tavis

If child is not yet named, write name of child at birth.

(3) SEX Girl (4) Type or Form — (5) Number in order of birth — (6) In case of twins Yes (7) Date of birth Feb 15 1923 (8) Time of birth — (9) Place of birth —(10) NAME OF FATHER Ed Tavis (11) NAME OF MOTHER Elizabeth Peterson(12) RESIDENT ADDRESS OF FATHER Blackburg S.C. (13) RESIDENT ADDRESS OF MOTHER Blackburg S.C.(14) COLOR OF FATHER White (15) AGE AT LAST BIRTHDAY 27 (16) COLOR OF MOTHER White (17) AGE AT LAST BIRTHDAY 27(18) BIRTHPLACE OF FATHER Union Cos S.C. (19) BIRTHPLACE OF MOTHER York Co S.C.(20) OCCUPATION OF FATHER Farmer (21) OCCUPATION OF MOTHER Housewife(22) Number of children born to mother, including present birth 6 (23) Number of children of this mother now living, including present birth 5(24) I hereby certify that I attended the birth of this child, who was... Alive (Born alive or stillborn) (Hour A. M. or P. M.)(25) (Signature) Emma F. Meacham (26) Name of Physician or Midwife Blackburg S.C.(27) (Signature) W. H. Moss (28) Name of Physician or Midwife Blackburg S.C.(29) (Signature) J. H. Whitcomb (30) Name of Physician or Midwife Blackburg S.C.