

(1) PLACE OF BIRTH

County of Charlottesville
Township of South Springs
or
Inc. Town of
or
City of

CERTIFICATE OF BIRTH

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

File No. - For this year only
1913

Registration District No. 4001B

Registered No. 321
(For use of Local Registrar)

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

(3) SEX OR CHILD girl (4) Type or Triplet To be answered only in case of Twins or Triplets (5) Number in order of birth 1 (6) Age yo (7) DATE OF BIRTH June 1 1923
(Month of Month) (Day) (Year)

FATHER.

(8) FULL NAME W. M. Rhodes

(9) PRESENT POSTOFFICE OF FATHER Arcadia

(10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 51
(Year)

(12) BIRTHPLACE A.C.

(13) OCCUPATION Day laborer

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

MOTHER.

(14) NAME BEFORE MARRIAGE Core Shelton

(15) PRESENT POSTOFFICE OF MOTHER Arcadia

(16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 30
(Year)

(18) BIRTHPLACE A.C.

(19) OCCUPATION Housewife

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

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(21) I hereby certify that I attended the birth of this child, who was Born alive at 1:15 P.M.
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(22) (Signature) Jina Payden
(23) State whether Physician or Midwife midwife

(24) Address of Physician or Midwife Arcadia, S.C.

Given name added from a supplemental report

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

(26) Filed June 15 1923 (27) 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.

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