

(1) PLACE OF BIRTH

County of Pickens

Township of

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

Registration District No. 9786

File No.—For State Registrar Only

11713

Registered No. 402
(For use of Local Registrar)(2) Full Name of Child Roseella McKinnis

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

(3) BOY OR GIRL <u>girl</u>	(4) Twin or Triplet To be answered only in event of Twin or Triplet	(5) Number in order of birth	(6) Age Parents Married <u>yes</u>	(7) DATE OF BIRTH <u>March 12, 1923</u> (Name of Month) (Day) (Year)
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FATHER.

(8) FULL NAME Louie McKinnis

(9) PRESENT POSTOFFICE OF FATHER Pickens S.C.

(10) COLOR OR RACE colored (11) AGE AT LAST BIRTHDAY 22
(Year)

(12) BIRTHPLACE Pickens Co

(13) OCCUPATION farmer

(14) Number of children born to mother, including present birth 11

MOTHER.

(15) NAME BEFORE MARRIAGE Rebecca Alexander

(16) PRESENT POSTOFFICE OF MOTHER Pickens S.C.

(17) COLOR OR RACE colored (18) AGE AT LAST BIRTHDAY 17
(Year)

(19) BIRTHPLACE Pickens Co

(20) OCCUPATION housewife

(21) Number of children of this mother now living, including present birth 11

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Belle Ferguson at 4 A. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Belle Ferguson(24) State whether Physician or Midwife midwife(25) Address of Physician or Midwife Pickens S.C.

Given name added from a supplemental report

(26) Witness

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

(27) Filed

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(28)

L. T. P. P. P.
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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