

(1) PLACE OF BIRTH

County of HenryTownship of Tunstallor
Inc. Town ofor
City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

Registration District No. 7509

File No. — For State Registrar Only

38883

Registered No. 81
(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 Albert Lloyd Little If child is not yet named, make supplemental report as directed(3) BOY OR GIRL Boy(4) Twin or Triplet? No
To be answered only in event of Twins or Triplets

(5) Number in order of birth

(6) Are Parents Married? Yes(7) DATE OF BIRTH Jan 12 1912
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Abbie Burr Little(9) PRESENT POSTOFFICE OF FATHER Lois R.C. R 2(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 212
(Years)(12) BIRTHPLACE Henry County, R.C.(13) OCCUPATION Farming(20) Number of children born to mother, including present birth Two

MOTHER.

(14) NAME BEFORE MARRIAGE Minnie Smith(15) PRESENT POSTOFFICE OF MOTHER Lois R.C. R 2(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 213
(Years)(18) BIRTHPLACE Henry County, R.C.(19) OCCUPATION Housewife(21) Number of children of this mother now living, including present birth Two

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Born alive at 11:40 A.M. on the date above stated.
(Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) J. D. Thomas

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Lois R.C.

Given name added from a supplemental report.

(26) Witness

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

(27) File No. 7509(28) 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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