

(1) PLACE OF BIRTH

County of JacksonTownship of Hellstonor
City of Exelor
City of Exel

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of HealthNo. 10 - For this Register
2930Registration District No. 10 Registered No. 10
(For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Margaret

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

(3) SEX OF CHILD Girl (4) Type of Twin No (5) Number in order of birth 1 (6) Age at birth yes (7) DATE OF BIRTH July 19 1923
(Name of child) (Year)

FATHER.

(8) FULL NAME Jarvis(9) PRESENT RESIDENCE OF FATHER Hellston SC(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 30
(Year)(12) BIRTHPLACE SC(13) OCCUPATION Farmer(14) Number of children born to mother, including present birth 2

MOTHER.

(15) NAME BEFORE MARRIAGE Trish Butler(16) PRESENT RESIDENCE OF MOTHER Hellston SC(17) COLOR OR RACE Negro (18) AGE AT LAST BIRTHDAY 25
(Year)(19) BIRTHPLACE SC(20) OCCUPATION Wife of Fred Hand(21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 7 A. M. on the date above stated.(23) (Signature) Mary C. Coker (24) State whether Physician or Midwife Midwife

Given name added from a supplemental report

(25) Witness J. H. Johnson (Signature of Witness necessary only when section 23 is signed by mother)(26) Filed July 24 1923(27) Registrar 19
When there was no attending physician or midwife, then the father, householder, or other person present at the birth, must not be reported as stillborn. No report is required before the fifth month of pregnancy.