

(1) PLACE OF BIRTH

County of Anderson
 Township of Sal
 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 State Registrar Only

12829

Registration District No. 206Registered No. 47
(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

George Oliver

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

(3) SEX OF CHILD boy (4) Twin or Triplet No (5) Number in order of birth 1 (6) Are Parents Married Yes (7) DATE OF BIRTH May 30, 23
 To be answered only in case of Twin or Triplet (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME George Pinkney Oliver
 (9) PRESENT POSTOFFICE OF FATHER Ira
 (10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 37
 (12) BIRTHPLACE Ind. Co
 (13) OCCUPATION Farming
 (14) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Josie Berry
 (15) PRESENT POSTOFFICE OF MOTHER Ira
 (16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 26
 (18) BIRTHPLACE Ind. Co
 (19) OCCUPATION House wife
 (20) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(22) (Signature) Ella Sadler(23) State whether Physician or Midwife Midwife(24) Address of Physician or Midwife Midwife

Given name added from a supplemental report

(25) Witness

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

(27) Filed June 4, 23(28) D. H. McAdams 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.