

Form No. 3

(1) PLACE OF BIRTH

County of Blount
 Township of Millan
 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

34451

For Only

Registration District No. 2011 Registered No. 72
 (For use of Local Registrar)

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(ra-).....
(Ward)

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

(2) Full Name of Child

Mary Benton

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

I make
 irected

3) BOY OR GIRL <u>girl</u>	4) Twin or Triplet? <u>No</u> To be answered only in event of Twin or Triplet	5) Number in order of birth <u>1</u>	6) Are Parents Married? <u>yes</u>	7) DATE OF BIRTH <u>Sept 16, 1922</u> (Month) (Day) (Year)
FATHER			MOTHER	
8) FULL NAME <u>John Morgan Benton</u>			14) NAME BEFORE MARRIAGE <u>Mary Hutchinson</u>	
9) PRESENT POSTOFFICE OF FATHER <u>Blount Co. #3</u>			15) PRESENT POSTOFFICE OF MOTHER <u>Blount Co. #3</u>	
10) COLOR OR RACE <u>White</u>	11) AGE AT LAST BIRTHDAY <u>47</u> (Years)	16) COLOR OR RACE <u>White</u>		
12) BIRTHPLACE <u>Blount Co., Ga.</u>		17) AGE AT LAST BIRTHDAY <u>33</u> (Years)		
13) OCCUPATION <u>Farmer</u>		18) OCCUPATION <u>Housewife</u>		
20) Number of children born to mother, including present birth <u>6</u>		21) Number of children of this mother now living, including present birth <u>6</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature)

(24) State whether Physician or Midwife

(25) (Signature of Physician or Midwife)

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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.....
 Registrar......
 return.

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.