

(1) PLACE OF BIRTH

County of AndersonTownship of Talbot

Inc. Town of.....

City of.....

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of Health

30928

Registration District No. 300Registered No. 131
(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 Annice Hardlaw

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

(3) SEX OF CHILD girl (4) Type or Name yes (5) Number in order of birth yes (6) DATE OF BIRTH Oct 16 23
(Name of Month) (Day) (Year)FATHER
(7) FULL NAME Ervin Hardlaw(8) PRESENT RESIDENCE OF FATHER Belton SC(9) COLOR OR RACE negro (10) AGE AT LAST BIRTHDAY 23
(Year)(11) BIRTHPLACE Greenwood SC(12) OCCUPATION farmer(13) Number of children born to mother, including present birth 4MOTHER
(14) NAME BEFORE MARRIAGE Irene Lewis(15) PRESENT RESIDENCE OF MOTHER Belton SC(16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 20
(Year)(18) BIRTHPLACE Greenwood S.C.(19) OCCUPATION HW(20) Number of children of this mother now living, including present birth 7

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(21) I hereby certify that I attended the birth of this child who was White 6 A M.
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(22) Signature Ron X Rogers (23) State whether Physician or Midwife Physician(24) Address of Physician or Midwife Belton SC

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

(26) Date Oct 29 23 (27) Local Registrar J. T. Fisher

This report is to be filed in the office of the Registrar, State Board of Health, Columbia, S.C., and a copy of the report is to be sent to the local registrar.

MAKING REMOVED FOR REASON.

THIS PLAINLY, WITH UNIFORMITY, THIS IS A PERMANENT RECORD.
A 2-2-23 USE OF FORMS ON CERTIFICATE AND A SEPARATE BLANK FOR EACH CHILD, AND MAKE THE
PROVISIONS, No. 1. THE OTHER, No. 2, etc. in question 2.