

## (1) PLACE OF BIRTH

County of Anderson

Township of .....

Inc. Town of .....

City of Anderson

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

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA  
Bureau of Vital Statistics  
State Board of HealthRegistration District No. 3ANo. 1129 - For State Registrar Only

19738

Registered No. 220  
(For use of Local Registrar)(2) Full Name of Child Mamie Meadowsaft Jolley

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

3) SEX- GIRL	4) Twin or Triplet To be answered only in event of Twin or Triplet	5) Number in order of birth	6) Are Parents Married	7) DATE OF BIRTH <u>July 8, 1923</u> (Name of Month) (Day) (Year)
FATHER.		MOTHER.		
8) FULL NAME <u>W. A. Jolley</u>		14) NAME BEFORE MARRIAGE <u>Harvey Rucker</u>		
9) PRESENT POSTOFFICE OF FATHER <u>Anderson</u>		15) PRESENT POSTOFFICE OF MOTHER <u>Anderson</u>		
10) COLOR OR RACE <u>W</u>	11) AGE AT LAST BIRTHDAY <u>3.4</u> (Years)	16) COLOR OR RACE <u>W</u>	17) AGE AT LAST BIRTHDAY <u>3.3</u> (Years)	
12) BIRTHPLACE <u>Shellman Ga</u>		18) BIRTHPLACE <u>Madison Ga</u>		
13) OCCUPATION <u>Salesman</u>		19) OCCUPATION <u>Housewife</u>		
20) Number of children born to mother, including present birth <u>2</u>		21) Number of children of this mother now living, including present birth <u>2</u>		

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was ..... at 4:45 M.,  
on the date above stated. (Born alive or stillborn: (Hour) (M. or P.M.))(23) (Signature) J. A. McMillan

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Anderson S.C.Given name added from a supplement-  
al report

(26) Witness

(Signature of Witness necessary only  
when question 23 is signed by mark)P. B. CRAYTON(27) Filed 8-10-23(28) ANDERSON 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.Filed 2/21, 1931Julia McMillan  
Registrar