

MARGIN RESERVED FOR BINDING.

WHITE PLAINLY. ADVISE THIS IS A PERMANENT RECORD. SIGNATURE OF FATHER OR MOTHER, AND MARK THE FIRST-BORN, NO. 1, THE OTHER, NO. 2, ETC. IN QUESTION 8.

(1) PLACE OF BIRTH

County of Anderson
Township of Hall
or
Inc. Town of

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only
3041

Registration District No. 206 Registered No. 65
(For use of Local Registrar)

City of (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 Eunice Mae Fant If child is not yet named, make supplemental report as directed

3) BOY OR GIRL? girl (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? Yes (7) DATE OF BIRTH Feb 13, 1928
To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER		MOTHER	
(8) FULL NAME <u>Robert Fant</u>	(14) NAME BEFORE MARRIAGE <u>Lula Burnett</u>		
(9) PRESENT POSTOFFICE OF FATHER <u>Ira</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Ira</u>		
(10) COLOR OR RACE <u>white</u> (11) AGE AT LAST BIRTHDAY <u>28</u> (Year)	(16) COLOR OR RACE <u>white</u> (17) AGE AT LAST BIRTHDAY <u>16</u> (Year)		
(12) BIRTHPLACE <u>Anderson Co -</u>	(18) BIRTHPLACE <u>Anderson Marion Yc</u>		
(13) OCCUPATION <u>Fanning</u>	(19) OCCUPATION <u>Housewife</u>		
(20) Number of children born to mother, including present birth <u>1</u>	(21) Number of children of this mother now living, including present birth <u>1</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature) Mary Fant
(24) State whether Physician or Midwife Midwife (25) Address of Phys. or Midwife Ira

Given name added from a supplemental report
(26) Witness (Signature of Witness necessary only when question 22 is signed by mark)
(27) Filed Feb 20, 1928 (28) S. M. Woodhouse 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.

MEDICAL COLUMBIA, COLUMBIA, S. C.