

**CERTIFICATE OF BIRTH**  
STATE OF SOUTH CAROLINA  
Bureau of Vital Statistics  
State Board of Health

File No.—For State Registrar Only

6817

(1) PLACE OF BIRTH

County of Spartanburg

Township of Woodruff

or  
Inc. Town of .....

or  
City of .....

Registration District No. 4009

Registered No. 57  
(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

Minnie Frances Beiers

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 1  
To be answered only in event of Twins or Triplets

(6) Are Parents Married? Yes

(7) DATE OF BIRTH May 11, 22  
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Clarence Beiers

(9) PRESENT POSTOFFICE OF FATHER Woodruff

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 32  
(Years)

(12) BIRTHPLACE Pelza S.S.

(13) OCCUPATION Mill Work

(14) Number of children born to mother, including present birth 7

MOTHER.

(14) NAME BEFORE MARRIAGE Rosa Theo

(15) PRESENT POSTOFFICE OF MOTHER Woodruff

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 32  
(Years)

(18) BIRTHPLACE Spartanburg Co

(19) OCCUPATION Domestic

(20) Number of children of this mother now living, including present birth 3

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\***

(22) I hereby certify that I attended the birth of this child, who was born alive at 5 a.m.  
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) O. H. McCarty

(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Woodruff

Given name added from a supplemental report

at

9 19 41

Registrar

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

(27) Filed June 8, 1922 (28) Chas. L. Boyter  
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.

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STATE OF SOUTH CAROLINA  
COUNTY ~~OF~~ SPARTANBURG

Personally appeared before L. F. Beiers  
Father, who after being duly sworn says that he is the  
father of Minnie Frances Beiers, who was born at Wood-  
ruff, S. C., on May 11, 1922, and was given the name of  
Minnie Frances Beiers shortly after birth; that inasmuch  
as her name does not appear on the record of her birth, ask  
that the name of Minnie Frances Beiers be inserted therein.

Sworn to before me this  
18th day of Dec. 1940

Clarence Beiers  
Notary Public for S. C.

x L. F. Beiers

Father: Clarence Beiers  
Mother: Rosa. Iles  
Date of birth: May 11-1922  
Physician: O. H. Mc Cord

55-12-51