

## (1) PLACE OF BIRTH

County of *Horry*Township of *Schultz*

or

Inc. Town of

or

City of

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

(2) Full Name of Child *Minnie Abraham*

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

(3) BOY OR GIRL *girl*(4) Twin or Triplet? *twins*(5) Number in order of birth *1*(6) Are Parents Married? *yes*

(7) DATE OF BIRTH

*Feb. 13, 1922*  
(Name of Month) (Day) (Year)

(8) FULL NAME

FATHER.

*Jas Abraham*

(9) PRESENT POSTOFFICE OF FATHER

*Augusta Ga. R 5*

(10) COLOR OR RACE

*Black*

(11) AGE AT LAST BIRTHDAY (Years)

(12) BIRTHPLACE

*S. C.*

(13) OCCUPATION

*Farming*

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

*7*

MOTHER.

(14) NAME BEFORE MARRIAGE

*Bessie Garrett*

(15) PRESENT POSTOFFICE OF MOTHER

*Augusta Ga. R 5*

(16) COLOR OR RACE

*Blk*

(17) AGE AT LAST BIRTHDAY (Years)

(18) BIRTHPLACE

*S. C.*

(19) OCCUPATION

*House*

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

*4*

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature)

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

(26) Witness

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

(27) Filed

*2/13/22*

(28)

*A. R. Medlock*

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.

File No.—For State Registrar Only

2891

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

Registration District No. *713*Registered No. *5*  
(For use of Local Registrar)

MAILED FEBRUARY 1922

RECEIVED OF COLUMBIA, S. C.