

(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

No. 12828 — For State Registrar Only

Registration District No. 3.06 Registered No. 39
 (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 Mayrune Hall (If child is not yet named, make supplemental report as directed)

(3) SEX OF CHILD girl (4) Twin or Triplet (5) Number in order of birth (6) Are Parents Married? Yes (7) DATE OF BIRTH May 3, 1923
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

FATHER.		MOTHER.	
(8) FULL NAME <u>Ernest Hall</u>	(14) NAME BEFORE MARRIAGE <u>Ellie Clark</u>	(15) PRESENT POSTOFFICE OF FATHER <u>Anderson R 7</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Anderson 7</u>
(10) COLOR OR RACE <u>negro</u> (11) AGE AT LAST BIRTHDAY <u>23</u> (Year)	(16) COLOR OR RACE <u>negro</u> (17) AGE AT LAST BIRTHDAY <u>22</u> (Year)	(18) BIRTHPLACE <u>Anderson S</u>	(18) BIRTHPLACE <u>Anderson N</u>
(19) OCCUPATION <u>Farming</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>1</u>

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was White at 2 P M., on the date above stated. (Born alive or stillborn) (Hour, A. M. or P. M.)

(23) (Signature) Julia Jones (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Anderson

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark) May 7, 1923 (27) Filed May 7, 1923 (28) W. M. McAdams 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.