

(1) PLACE OF BIRTH

County of AndersonTownship of Tilton

Inc. Town of

City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of HealthFile No. - For State Registrar Only
19776Registration District No. 300 Registered No. 92
(For use of Local Registrar)

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

(2) Full Name of Child Jamie Margaret Hobson If child is not yet named, make supplemental report as directed

(3) SEX GIRL	(4) Twin or Triplet	(5) Number in order of birth	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH (Month of Birth) (Day) (Year) <u>July 17, 1923</u>
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(8) FULL NAME <u>Kenneth Robinson</u>	FATHER.	(9) NAME BEFORE MARRIAGE <u>Killie Matthis</u>	MOTHER.
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(10) PRESENT POSTOFFICE OF FATHER <u>Beltan, SC</u>	(11) PRESENT POSTOFFICE OF MOTHER <u>Beltan SC</u>
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(12) COLOR OR RACE <u>Negro</u>	(13) AGE AT LAST BIRTHDAY <u>21</u> (Years)	(14) COLOR OR RACE <u>White</u>	(15) AGE AT LAST BIRTHDAY <u>21</u> (Years)
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(16) BIRTHPLACE <u>Beltan SC</u>	(17) BIRTHPLACE <u>Beltan SC</u>
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(18) OCCUPATION <u>farmer</u>	(19) OCCUPATION <u>husb</u>
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(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>
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CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Alive at 12 M.
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) S. J. Acle
(24) State whether Physician or Midwife (25) Address of Physician or Midwife
Midwife Beltan SC

Given name added from a supplemental report

(26) Witness
(Signature of Witness necessary only when question 23 is signed by mark)(27) July 23, 1923 (28) S. J. Acle
Registrar 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.