

(1) PLACE OF BIRTH

County of Langston

CERTIFICATE OF BIRTH  
STATE OF MISSISSIPPI  
BUREAU OF VITAL STATISTICS  
MONTH

FILE - IN BUREAU  
28410

Birth No. 8116 Registered No. 94  
(For use of Local Registrar)

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

(2) Full Name of Child Arthur L. Hunt If child is not yet named, make supplemental report as directed

(3) SEX OF CHILD Boy (4) Twin or Triplet No (5) Number in order of birth 1st (6) Age of Child 7 yr (7) DATE OF BIRTH Sept 2 1944  
(Name) (Month) (Day) (Year)

FATHER			MOTHER				
(8) FULL NAME	<u>Henry Hunt</u>	(14) NAME BEFORE MARRIAGE	<u>Martha Hunt</u>	(9) PRESENT RESIDENCE OF FATHER	<u>Wards Mills S.C.</u>	(15) PRESENT RESIDENCE OF MOTHER	<u>Wards Mills S.C.</u>
(10) COLOR OR RACE	<u>White</u>	(11) AGE AT LAST BIRTHDAY	<u>44</u>	(16) COLOR OR RACE	<u>White</u>	(17) AGE AT LAST BIRTHDAY	<u>41</u>
(12) BIRTHPLACE	<u>S.C.</u>	(18) BIRTHPLACE	<u>S.C.</u>	(19) OCCUPATION	<u>Farmer</u>	(20) OCCUPATION	<u>Farmer</u>
(21) Number of children born to mother, including present birth	<u>11</u>	(22) Number of children of this mother now living, including present birth	<u>11</u>				

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(24) (Signature) Charles E. Hunt (25) Address of Physician or Midwife Wards Mills S.C.

Given name added from a supplemental report See Affidavit (1935)  
11/9/44 L.A.R.  
Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by nurse)  
(27) Filed Sept 4 1944 (28) 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.