

(1) PLACE OF BIRTH

CERTIFICATE OF BIRTH

File No. — For State Registrar Only

(1) PLACE OF BIRTH

County of Maryon

Township of

OF

Inc. Town of Mullins

OF

City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No. — For State Registrar Only

7763

Registration District No. 3718Registered No. 7

(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 Albert Edgarson

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

(3) BOY OR GIRL

(4) Twin or Triplet

(5) Number in order of birth

(6) Are Parents Married

(7) DATE OF BIRTH

(Time of Month) (Day) (Year)

FATHER.

(8) FULL NAME Bollie Edgarson(9) PRESENT POSTOFFICE OF FATHER Mullins, SC(10) COLOR OR RACE col(11) AGE AT LAST BIRTHDAY 24 (Year)(12) BIRTHPLACE Lyons, Ga(13) OCCUPATION Farmer(20) Number of children born to mother, including present birth 12

MOTHER.

(14) NAME BEFORE MARRIAGE Hattie Kears(15) PRESENT POSTOFFICE OF MOTHER Mullins SC(16) COLOR OR RACE col(17) AGE AT LAST BIRTHDAY 22 (Year)(18) BIRTHPLACE Mullins, SC(19) OCCUPATION Housewife(21) Number of children of this mother now living, including present birth 11

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 3:45 PM on the date above stated. (Born alive or stillborn) (Hour, M. or P. M.)(23) (Signature) Mellou m. Coulter(24) State whether Physician or Midwife (25) Address of Physician or Midwife Mullins SC

Given name added from a supplemental report

(26) Witness

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

(27) Filed Feb 10 1973 (28) J. J. Schaffer 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.