

(1) PLACE OF BIRTH

County of Columbia S.C.

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No. 18866 For State Registrar Only

Township of

or
Inc. Town ofRegistration District No. 38aRegistered No. 1439
(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 Indelle Taylor

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

| | | | | |
|------------------------------|----------------------|---|-------------------------------------|--|
| (3) BOY OR GIRL? <u>Girl</u> | (4) Twin or Triplet? | (5) Number in order of birth <u>one</u> | (6) Are Parents Married? <u>Yes</u> | (7) DATE OF BIRTH <u>Aug. 30, 1916</u> (Name of Month) (Day) (Year) |
|------------------------------|----------------------|---|-------------------------------------|--|

FATHER.
(8) FULL NAME George Taylor(9) PRESENT POSTOFFICE OF FATHER 317 Barnwell st.(10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 28
(Years)(12) BIRTHPLACE Hopkin S.C.(13) OCCUPATION Day laborer(14) Number of children born to mother, including present birth 3MOTHER.
(14) NAME BEFORE MARRIAGE Lottie Adams(15) PRESENT POSTOFFICE OF MOTHER 317 Barnwell st.(16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 27
(Years)(18) BIRTHPLACE Hopkin S.C.(19) OCCUPATION Cook(20) Number of children of this mother now living, including present birth three

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(21) I hereby certify that I attended the birth of this child, who was born alive 6 a.m.
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Maggie Jones(24) State whether Physician or Midwife midwife (25) Address of Physician or Midwife 1716 Rice St

Given name added from a supplemental report

1-23-47
101Registrar F. Jones

(26) Witness

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

(27) Filed

9/22/16

(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.