

(1) PLACE OF BIRTH

County of CherokeeTownship of Cherokeeor
Inc. Town of Blacksburgor
City of

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

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

17995

Registration District No. 19.008 Registered No. 52
(For use of Local Registrar)

(No. St.; Ward)

(2) Full Name of Child

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

(3) BOY OR GIRL?

Boy

(4) Twin or Triplet?

To be answered only in event of Twins or Triplets

(5) Number in order of birth

(6) Are Parents Married? Yes

(7) DATE OF

BIRTH June 8, 1922
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Robert Fred Taylor

(9) PRESENT POSTOFFICE OF FATHER

Blacksburg, S. C.

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY 30
(Years)

(12) BIRTHPLACE

N. C.

(13) OCCUPATION

Cotton Mill Operative

(20) Number of children born to mother, including present birth

Five (5)

MOTHER.

(14) NAME BEFORE MARRIAGE

Leila Hope Isler

(15) PRESENT POSTOFFICE OF MOTHER

Blacksburg, S. C.

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY 24
(Years)

(18) BIRTHPLACE

Cherokee Co., S. C.

(19) OCCUPATION

Housewife

(21) Number of children of this mother now living, including present birth

Four (4)

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 1:50 P.M.
(Born alive or stillborn) (Hour A. M. or P. M.)
on the date above stated.(23) (Signature) E. L. Little

(24) State whether Physician or Midwife

Physician

(25) Address of Physician or Midwife

Blacksburg, S. C.

Given name added from a supplemental report

(26) Witness

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

(27) Filed June 30, 1922 (28) J. C. Roberts

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.

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