

(1) PLACE OF BIRTH
County of Spokaneburg
Township of Paedict
City of _____
or 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
79287

Registration District No. 4006 Registered No. 129
(For use of Local Registrar)
No. _____ St. _____ Ward _____
(2) Full Name of Child Zenobia F. Alley } If child is not yet named, make supplemental report as directed.

(3) SEX OR GENDER girl (4) Twin or Triplet? no (5) Number in order of birth _____ (6) Are Parents Married? yes (7) DATE OF BIRTH 9-7-6
(Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME Robt. C. Alley
(9) PRESENT POSTOFFICE OF FATHER Trough Mt. S.C.
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 32 (Years)
(12) BIRTHPLACE N.C.
(13) OCCUPATION Mill operative
(14) Number of children born to mother, including present birth 3

MOTHER.
(14) NAME BEFORE MARRIAGE Minnie L. Lennous
(15) PRESENT POSTOFFICE OF MOTHER Trough S.C.
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 28 (Years)
(18) BIRTHPLACE N.C.
(19) OCCUPATION Housewife
(21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 8 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)
(23) (Signature) M. L. Kirkpatrick
(24) State whether Physician or Midwife (25) Address of Physician or Midwife
M. D. Paedict S.C.

Other name added from a supplemental report _____
191 _____
Registrar

(26) Witness _____
(Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed 9-19-6 191 (28) M. W. Brown
Local Registrar

*If 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.