

(1) PLACE OF BIRTH

County of BerkleyTownship of St. Stephens

Inc. Town of

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 HealthNo. 13021Registration District No. 708 Registered No. 48
(For use of Local Registrar)(2) Full Name of Child Jessie H. Hardy (If child is not yet named, make supplemental report as directed)(3) BOY OR GIRL B (4) Twin or Triple Trin (5) Number in order of birth 2 (6) Sex Female (7) DATE OF BIRTH May 11, 1928
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Shepherd Hardy(9) PRESENT POSTOFFICE OF FATHER St. Stephens(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 22
(Year)(12) BIRTHPLACE St. Stephens(13) OCCUPATION Public work(14) Number of children born to mother, including present birth 6

MOTHER.

(15) NAME BEFORE MARRIAGE Alise Hatfield(16) PRESENT POSTOFFICE OF MOTHER St. Stephens(17) COLOR OR RACE Negro (18) AGE AT LAST BIRTHDAY 29
(Year)(19) BIRTHPLACE Alvin(20) OCCUPATION Housewife(21) Number of children of this mother now living, including present birth 5

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 7 P. M.
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) E. C. Green(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Roanoke

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 25 is signed by mark)

(27) Signed May 11, 1928 (28) W. D. Foy 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.

WRITES PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD. IN CASE OF TWIN OR TRIPLETS USE A SEPARATE BLANK FOR EACH CHILD, AND MARK ON FIRST-BORN, No. 1, THE OTHER, No. 2, ETC. IN QUESTION 1.