

3-29-45

MARGIN RESERVED FOR BINDING

WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD

N. B.—In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each, in order of birth, stated.

(See instructions on Back of Certificate.)

U. S. Dept. of Commerce
Bureau of the Census

1. PLACE OF BIRTH

County of Aiken

Township of _____

or

Inc. Town of _____

or

City of Aiken, S.C.

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

Standard Certificate of Birth

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

Registration District No. 20 Registered No. _____

(For use of Local Registrar)

Ward _____

FILE No.—For State Registrar Only

0003

2. FULL NAME OF CHILD

Mary Josephine George

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

3. Boy or Girl

Girl

4. If Plural

births

5. Twins, triplets or other.....

6. Premature

7. Are Parents

8. Date of

birth

Nov. 20, 1915
(Month, day, year)

5. Number, in order of birth.....

Full term

Married? yes

9. Full name

Milledge Holley George

FATHER

10. Residence (mailing address)

(If non-resident, give place and State) Aiken, S.C.11. Color or race white12. Age at child's birth 29 (years)

13. Birthplace (city or place)

Aiken, S.C.
(State or country)

14. Trade, profession or particular kind of work done, as spinner, sawyer, bookkeeper, etc.....

farmer

15. Industry or business in which work done, as silk mill, sawmill, bank, etc.....

farmer

16. Date (month and year) last engaged in this work

October 192417. Total time (years) spent in this work 20

18. Name before marriage

Pearl Coward

MOTHER

19. Residence (mailing address)

(If non-resident, give place and State) Aiken, S.C.20. Color or race white21. Age at child's birth 23 (years)

22. Birthplace (city or place)

Aiken, S.C.
(State or country)

23. Trade, profession, or particular kind of work done, as housekeeper, typist, nurse, clerk, etc.....

Housewife

24. Industry or business in which work was done, as own home, lawyer's office, silk mill, etc.....

25. Date (month and year) last engaged in this work

26. Total time (years) spent in this work.....

27. Number of children of this mother

(At time of birth and including this child (a) Born alive and now living 3 (b) Born alive but now dead 0 (c) Stillborn 0)

28. If stillborn, period of gestation.....

months
weeks

29. Cause of stillbirth

{ Before labor
During labor

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify to the birth of this child, who was born at 2 A m. on the date above stated.

{ When there was no attending physician or midwife, then the father, householder etc., should make this return.

Given name added from a supplementary report.....

(Date of)

(Signed) Milledge H. George, Parent or _____, GuardianAddress Aiken R.F.D.
Filed April 26, 1945 L.A. Riser, M. D.

Registrar.

Registrar.

15 045695

AFFIDAVIT

State of South Carolina

County of Aiken

Personally appeared before me, Irene George
and Spann H. George, who being duly sworn, deposes and says:

1. That he (she) or he (she) reside in Aiken County of
S. C. and Aiken County of South Carolina

Deponents further state that they are 54 and 66 years of age, respectively.

2. That of these deponents own knowledge, there was born to Pearl George
(Name of Mother)
a ~~(male)~~ (female) child, Mary Josephine George, in Aiken South Carolina,
(Name of Child) (Town) (County)
on or about the 20th day of November, 1915

3. That these deponents are related to the child referred to herein as Aunt
and uncle, respectively.

Sworn to and subscribed before me,

this the 16 day of April, 1945

Lillie Mae Higgins
(Notary Public, S. C.)

X Spann H. George
X Irene George

These affidavits required in accordance with Regulation 16 of Rules and Regulations for Vital Statistics under
authority Section 5130 of Civil Code of South Carolina for the year 1942.