

(1) PLACE OF BIRTH

County of AlbermarleTownship of Wilsonor
Inc. Town ofor
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

6347

Registration District No. 4645Registered No. 9
(For use of Local Registrar)

(No. St.; Ward)

(2) Full Name of Child

Minnie Talbot

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

(3) BOY OR GIRL? Girl

(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 March 23, 1922
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Rufus Talbot(9) PRESENT POSTOFFICE OF FATHER Benton SC(10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 37
(Years)(12) BIRTHPLACE Bentonville SC(13) OCCUPATION Farming(20) Number of children born to mother, including present birth 3

MOTHER.

(14) NAME BEFORE MARRIAGE Rose Talbot(15) PRESENT POSTOFFICE OF MOTHER Benton SC(16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 23
(Years)(18) BIRTHPLACE SC(19) OCCUPATION house wife(21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born at 8:30 P.M.,
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Gill Semons(24) State whether Physician or Midwife Midwife(25) Address of Physician or Midwife Benton SC

Given name added from a supplemental report

(26) Witness
(Signature of Witness necessary only when question 23 is signed by mark)(27) Filed March 31, 1922 (28) J. A. Rouse
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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