

(1) PLACE OF BIRTH

County of SumterTownship of Sumter

or

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 Health

File No. For State Registrar Only

92013

Registration District No. 4107Registered No. 126

(For use by Local Registrar)

(2) Full Name of Child Henry Moore

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

(3) BOY OR GIRL? Boy(4) Twin or Triplet? 1(5) Number in order of birth 1

To be answered only in event of Twins or Triplets

(6) Are Parents Married? Yes

(7) DATE OF BIRTH

Dec 14, 1914

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Moore Moore(9) PRESENT POSTOFFICE OF FATHER Lynchburg Se(10) COLOR OR RACE Negro(11) AGE AT LAST BIRTHDAY 30 (Years)(12) BIRTHPLACE Sumter, SC(13) OCCUPATION Farming(14) Number of children born to mother, including present birth 2

MOTHER.

(14) NAME BEFORE MARRIAGE Ellen Dickey(15) PRESENT POSTOFFICE OF MOTHER Lynchburg Se(16) COLOR OR RACE Negro(17) AGE AT LAST BIRTHDAY 23 (Years)(18) BIRTHPLACE Sumter, SC(19) OCCUPATION Housekeeper(20) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(21) I hereby certify that I attended the birth of this child, who was alive at 6 P.M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) L. B. McElwain

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Midwife Shiloh, SC

Given name added from a supplemental report

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Registrar

(26) Witness

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

(27) Filed 12-17-1914(28) L. B. McElwain

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.

MADE IN ACCORDANCE WITH AN ACT OF THE GENERAL ASSEMBLY OF THE STATE OF SOUTH CAROLINA, PASSED MARCH 1, 1905, CHAP. 11, SECTION 1. IN CASE OF TWINS OR TRIPLETS, SEE A SUPPLEMENTARY BLANK, NO. 3, IN QUESTION 6. McElwain, Columbia