

(1) PLACE OF BIRTH

County of UnionTownship of Jamison S.B.

or

Inc. Town of

or

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

66527

Registration District No. 37

(For use of Local Registrar)

St.; Ward(2) Full Name of Child Wilhemina Pung If child is not yet named, make supplemental report as directed(3) BOY OR GIRL? Girl

(4) Twin or Triplet?

(5) Number in order of birth

(6) Are Parents Married? Yes(7) DATE OF BIRTH June 17, 1916

(Name) (Month) (Day) (Year)

To be answered only in case of Twins or Triplets

FATHER.

(8) FULL NAME Drayton Pung(9) PRESENT POSTOFFICE OF FATHER Jamison S.B. R4D(10) COLOR OR RACE Celad(11) AGE AT LAST BIRTHDAY 36 (Years)(12) BIRTHPLACE Union County(13) OCCUPATION Farmer(14) Number of children born to mother, including present birth 4

MOTHER.

(14) NAME BEFORE MARRIAGE Sophie Thompson(15) PRESENT POSTOFFICE OF MOTHER Jamison S.B. R4D(16) COLOR OR RACE Celad(17) AGE AT LAST BIRTHDAY 24 (Years)(18) BIRTHPLACE Union County(19) OCCUPATION Housewife(20) Number of children of this mother now living, including present birth 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 5-2 M. on the date above stated. (Hour A. M. or P. M.)(23) (Signature) Lizzie Womack

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

Given name added from a supplemental report

(26) Witness

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

On Filed June 16, 1916 (27) B. N. Coleman 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.

WITH PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
M. H.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the FIRST-BORN, No. 1, SECOND-BORN, No. 2, etc., in question 8.

M. H. of Columbia