

Form No. 1.

(1) PLACE OF BIRTH

County of

Dillon
Beatha

Township of

Loc. Town of

City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

64092

Registration District No.

1606

Registered No.

54

(For use of Local Registrar)

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

(2) Full Name of Child *Thelma Brumble*

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

(3) SEX
GIRL

girl

(4) Twin or Triplet

no

(5) Number in order of birth

1

(6) Age

4

(7) DATE OF BIRTH

June 22

(8) Year

1906

(9) Month

22

(10) Day

1906

(11) Year

1906

FATHER

(12) FULL NAME

Winfield Brumble

(13) PRESENT POSTOFFICE OF FATHER

RT & No. 1 Latta St

(14) COLOR OR RACE

White

(15) AGE AT LAST BIRTHDAY

35

(16) YEARS

(17) BIRTHPLACE

SC

(18) OCCUPATION

Farming

(19) Number of children born to mother, including present birth

3

MOTHER

(20) NAME BEFORE MARRIAGE

Bessie Tucker

(21) PRESENT POSTOFFICE OF MOTHER

RT & No. 1 Latta St

(22) COLOR OR RACE

White

(23) AGE AT LAST BIRTHDAY

23

(24) YEARS

(25) BIRTHPLACE

SC

(26) OCCUPATION

Domestic

(27) Number of children of this mother now living, including present birth

2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(28) I hereby certify that I attended the birth of this child, who was *White* on the date above stated. (Color or complexion) (Give A. M. or P. M.)

(29) Signature

E. C. May

(30) Name of Physician or Midwife

Latta St

Physician

Latta St

Given name added from a supplemental report

(31) Witness

(Signature of Witness necessary only when question 28 is signed by mother)

(32) File

June 22

1906

1906

*When there was no attending physician or midwife, then the father, grandmother, 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.

ALABAMA GOVERNMENT PRINTING OFFICE
WHEN PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
No. 1.—In case of TWINS or TRIPLETS use a SEPARATE BLANK for each CHILD, and mark the FIRST-BORN, No. 1, THE OTHER, No. 2, etc., accordingly.