

(1) PLACE OF BIRTH

County of Sumter

Township of

or
Inc. Town ofCity of Sumter

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

(2) Full Name of Child William Boykin Eum

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

(3) BOY OR GIRL?

Boy

(4) Twin or Triplet?

No

(5) Number in order of birth

1st

(6) Are Parents Married?

yes

(7) DATE OF BIRTH

Dec. 29 1917

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Clifford Poinsett Eum

(9) PRESENT POSTOFFICE OF FATHER

Sumter S.C.

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

36

(12) BIRTHPLACE

North Carolina

(13) OCCUPATION

Cotton Buyer

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

One

MOTHER.

(14) NAME BEFORE MARRIAGE

Lula Cooke Boykin

(15) PRESENT POSTOFFICE OF MOTHER

Sumter S.C.

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

28

(18) BIRTHPLACE

Camden, S.C.

(19) OCCUPATION

Housewife

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

One

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

Annie China M.D.

(24) State whether Physician or Midwife

Physician

(25) Address of Physician or Midwife

Sumter S.C.

Given name added from a supplemental report

(26) Witness

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

(27) Filed

Jan. 6, 1917(28) M. J. McKee 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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