

(1) PLACE OF BIRTH

County of OrangeburgTownship of Trident

OR

Inc. Town of

OR

City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

29741

Registration District No. 3619Registered No. 43

(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 Myrtis Lerone Jernigan

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 Twin or Triplet

(5) Number in order of birth

(6) Are Parents Married yes

(7) DATE OF

BIRTH Sept. 20, 1930
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Jeff Shallow Jernigan(9) PRESENT POSTOFFICE OF FATHER Lowndes Co.(10) COLOR OR RACE White(11) AGE AT LAST BIRTHDAY 5
(Years)(12) BIRTHPLACE Orangeburg County(13) OCCUPATION Farmer(20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Leura Birchmore(15) PRESENT POSTOFFICE OF MOTHER Lowndes Co.(16) COLOR OR RACE White(17) AGE AT LAST BIRTHDAY 23
(Years)(18) BIRTHPLACE Calhoun County(19) OCCUPATION Housewife(21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(22) I hereby certify that I attended the birth of this child, who was Leura Birchmore at 9. A. M.,
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) W. L. Mark(24) State whether Physician or Midwife Physician(25) Address of Physician or Midwife Lowndes Co.

(Given name added from a supplemental report)

(26) Witness

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

(27) Filed 10-3 19 33(28) W. L. Mark
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.When there was no attending physician or midwife, then the father, householder, etc., should make this return.
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