

(1) PLACE OF BIRTH

County of Seftington

Township of

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

43561

Registration District No. 3109Registered No. 130
(For use of Local Registrar)(2) Full Name of Child Mary Lucile Kammer

(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 Twins or Triplets

(5) Number in order of birth

(6) Are Parents Married? yes

(7) DATE OF

BIRTH Oct 28, 1922
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Erby Julian Kammer(9) PRESENT POSTOFFICE OF FATHER Seftington(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 36
(Year)(12) BIRTHPLACE Seft. Co.(13) OCCUPATION Farmer(20) Number of children born to mother, including present birth 3

MOTHER.

(14) NAME BEFORE MARRIAGE Emmie Estelle Ingelore(15) PRESENT POSTOFFICE OF MOTHER Seftington S.C.(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 31
(Year)(18) BIRTHPLACE Seft. Co.(19) OCCUPATION Domestic(21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 12:15 P.
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) H. F. Roberts M.D.

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Seftington

Given name added from a supplemental report

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

(27) Filed Jan 9, 1923 (28) Mrs. C. E. Taylor
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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WHITE PLAINS. WITH UNPAID REGISTRATIONS IS FURNISHED FOR EACH CHILD, and mark the
 FIRST-BORN, No. 1. THIS OTHER, No. 2, etc., in question 5.

RECEIVED OF COLUMBIA, COLUMBIA, S. C.

RECEIVED