

(1) PLACE OF BIRTH

County of Sumter
Township of
or
Inc. Town of
City of Sumter

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of Health

File No.—For State Registrar Only

8633

Registration District No. H. A. Registered No. 99
(For use of Local Registrar)

(No. 7525 Sumter St.; Ward)

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

(2) Full Name of Child Jamie S. Pringle If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Boy (4) Twin or Triplet To be answered only in event of Twin or Triplet (5) Are Parents Married yes (6) DATE OF BIRTH Feb. 26, 23 (Name of Month) (Day) (Year)

FATHER. (7) FULL NAME Sam Pringle (8) PRESENT POSTOFFICE OF FATHER Sumter - S.C. (9) COLOR OR RACE Black (10) AGE AT LAST BIRTHDAY 41 (Year) (11) BIRTHPLACE Sumter - S.C. (12) OCCUPATION Laborer (13) Number of children born to mother, including present birth 10 MOTHER. (14) NAME BEFORE MARRIAGE Rebecca James (15) PRESENT POSTOFFICE OF MOTHER Sumter - S.C. (16) COLOR OR RACE Black (17) AGE AT LAST BIRTHDAY 25 (Year) (18) BIRTHPLACE Sumter - S.C. (19) OCCUPATION Housekeeping (20) Number of children of this mother now living, including present birth 5

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(21) I hereby certify that I attended the birth of this child, who was born at 11 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(22) (Signature) J. S. Pringle (23) State whether Physician or Midwife Midwife (24) Address of Physician or Midwife Sumter - S.C.

(Given name added from a supplemental report)

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

(26) Filed Mar. 17, 1923 (27) W. O. Brumby 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.

FIRST-BORN. No. 1. THE OTHER. No. 2, etc. In question 1.