

## (1) PLACE OF BIRTH

County of Sumner

Township of .....

Inc. Town of .....

City of Sumner

(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

40178

Registration District No. 20-A Registered No. 388

(For use of Local Registrar)

(No. E. Day Extension St. 1 Ward)

## (2) Full Name of Child

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 case of Twin or Triplet

(5) Number in order of birth

(6) Are Parents Married yes(7) DATE OF BIRTH Dec 4 1923

(Name of Month) (Day) (Year)

## FATHER

8) FULL NAME Nathan Harold9) PRESENT POSTOFFICE OF FATHER Sumner S.C.(10) COLOR OR RACE w(11) AGE AT LAST BIRTHDAY 30

(Year)

(12) BIRTHPLACE Sumner Co S.C.(13) OCCUPATION Farmer20) Number of children born to mother, including present birth 7

## MOTHER

(14) NAME BEFORE MARRIAGE Ruby Annie Collins(15) PRESENT POSTOFFICE OF MOTHER Sumner S.C.(16) COLOR OR RACE w(17) AGE AT LAST BIRTHDAY 27

(Year)

(18) BIRTHPLACE Sumner Co S.C.(19) OCCUPATION Domestic(21) Number of children of this mother now living, including present birth 4

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 9 A. M., on the date above stated. (Hour A. M. or P. M.)(23) (Signature) H. H. H.

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Sumner 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 Dec 3 1923P. H. Brigham  
Local Registrar

When there was no attending physician or midwife, then the father, householder, etc., should make this report. 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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WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.  
N.B.—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. In question 1