CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only: 8523

(1) PLACE OF BIRTH
County of Newberry
Township of 2
or
Inc. Town of
or
City of
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

Registration District No. 34.64 Registered No. 13
(For use of Local Registrar)
(No. St.; Ward)

(2) Full Name of Child Arthur Burnside Jr.
(If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL? Boy
(4) Twin or Triplet? —
(5) Number in order of birth —
To be answered only in event of Twins or Triplets
(6) Are Parents Married? Yes
(7) DATE OF BIRTH Feb. 28 (Name of Month) (Day) 19 22 (Year)

FATHER.

(8) FULL NAME Arthur Burnside
(9) PRESENT POSTOFFICE OF FATHER Newberry, S.C. R#6
(10) COLOR OR RACE Colored
(11) AGE AT LAST BIRTHDAY 42 (Years)
(12) BIRTHPLACE Newberry Co., S.C.
(13) OCCUPATION Farm laborer
(20) Number of children born to mother, including present birth 14

MOTHER.

(14) NAME BEFORE MARRIAGE Dink (?) Schumpert
(15) PRESENT POSTOFFICE OF MOTHER Newberry, S.C. R#6
(16) COLOR OR RACE Colored
(17) AGE AT LAST BIRTHDAY 21 (Years)
(18) BIRTHPLACE Newberry Co., S.C.
(19) OCCUPATION Farm laborer
(21) Number of children of this mother now living, including present birth 14

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive (Born alive or stillborn) at 11.05 A.M. (Hour A. M. or P. M.) on the date above stated.

(23) (Signature) Lizzie x Rice
(24) State whether Physician or Midwife Midwife
(25) Address of Physician or Midwife Newberry, S.C. R#6

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

(27) Filed April 10 19 22 (28) [illegible] Local Registrar.

Given name added from a supplemental report
..... 19 ....
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.

Local Registrar.

Registrar

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NOTE—In case of TWINS or TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the FIRST-BORN, No. 1; THE OTHERS, No. 2, etc., in question 5.

McCaw Co. McCaw of Columbia, Columbia, S. C.