

(1) PLACE OF BIRTH

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

CERTIFICATE OF BIRTH

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

File No. — For State Registrar Only

12848

Registration District No. 4401Registered No. 17
(For use of Local Registrar)

(No. 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 Lindsey Palmer Chempack (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL Girl (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Feb 25 19 33
 (Name of Month) (Day) (Year)

FATHER

(8) FULL NAME John H. Chempack
 (9) PRESENT POSTOFFICE OF FATHER Greenville, S.C.
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 38 (Years)
 (12) BIRTHPLACE Greenville, S.C.
 (13) OCCUPATION Teacher

MOTHER

(14) NAME BEFORE MARRIAGE Edith M. Howard
 (15) PRESENT POSTOFFICE OF MOTHER Greenville, S.C.
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 32 (Years)
 (18) BIRTHPLACE Greenville, S.C.
 (19) OCCUPATION Housewife
 (20) Number of children born to mother, including present birth 1
 (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 Edith at 4:15 P. M. on the date above stated. (Born alive or stillborn) (Hour, M. or P. M.)

(23) (Signature) R. G. Johnston
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife Greenville, 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 4-21 19 33 (28) C. L. Murphy 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.

Registrar C. L. Murphy Local Registrar C. L. Murphy

*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.

RECEIVED BY THE REGISTRAR, BUREAU OF VITAL STATISTICS, STATE OF SOUTH CAROLINA, COLUMBIA, S.C.
 RECORDED BY THE REGISTRAR, BUREAU OF VITAL STATISTICS, STATE OF SOUTH CAROLINA, COLUMBIA, S.C.
 INDEXED BY THE REGISTRAR, BUREAU OF VITAL STATISTICS, STATE OF SOUTH CAROLINA, COLUMBIA, S.C.



Davidson sk
May - 17 1941

This is to Certify that
the original names is
Lindzey Palmer
Champion

Sworn to
before me at
Davidson's
this 17th day
of May, 1941

J. C. Copeland
Notary Public
com. Expires at 11:00
of 1941

may Champion
nothing

NOTARY PUBLIC

MARGIN RESERVED FOR BINDING.
WHILE TRAVELING WITH UNPAID INK—THIS IS A PERMANENT RECORD.
THESE TRIPLETTS ARE A REPARATE BLANK FOR EACH CHILD, and under the
FIRST-BORN, No. 1. THE OTHER, No. 2, etc. in question 5.

(1) PLACE	
County of	
Township	
or	
Inc. Town	
or	
City of	
(14)	
(2) Full	
(3) BOY OR GIRL?	
(6) FULL NAME	
(9) PRESENT POSTOFF OF FATH	
(10) COLOR OR RACE	
(12) BIRTH	
(13) OCCUPA	
(20) Number mother	
(22) 11	
Given on	
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