

(1) PLACE OF BIRTH

County of Barnwell
 Township of Ref. Wat.
 or
 Inc. Town of Buell's
 or
 City of

CERTIFICATE OF BIRTH

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

File No.—for State Registrar Only

12950

Registration District No. 1-2-7 Registered No. 2-9

(For use of Local Registrar)

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

(2) Full Name of Child Christina Lumber If child is not yet named, make supplemental report as directed

(3) SEX OR GROWTH girl (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH May 6, 1923
 To be answered only in case of Twin or Triplet (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME John Lumber
 (9) PRESENT POSTOFFICE OF FATHER Lanora S.C.
 (10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 25
 (12) BIRTHPLACE S.C.
 (13) OCCUPATION Public Work

MOTHER.

(14) NAME BEFORE MARRIAGE Mrs. Lumber
 (15) PRESENT POSTOFFICE OF MOTHER Lanora S.C.
 (16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 24
 (18) BIRTHPLACE S.C.
 (19) OCCUPATION Public Work

(20) Number of children born to mother, including present birth 4 (21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive or stillborn at 12:24 P.M. on the date above stated. (Hour A. M. or P. M.)

(23) (Signature) John Lumber(24) State whether Physician or Midwife Physician Address of Physician or Midwife

Given name added from a supplemental report

(25) Witness W. J. Parker
 (Signature of Witness necessary only when question 23 is signed by mark)

(26) Filed May 4, 1923 (27) Mrs. Parker Local Registrar

*When there was no attending physician or midwife, when 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.

WRITER PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD. IN CASE OF TWINS OR TRIPLETS, AND IN CASE OF STILLBIRTHS, AND IN CASE OF DEATHS, AND IN CASE OF MARRIAGES, AND IN CASE OF DIVORCES, AND IN CASE OF ADoptions, AND IN CASE OF OTHERS, NO. 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100.