

MARGIN RESERVED FOR INDEXING.
 WRITE PLAINLY, WITH INK, AND IN A PERMANENT RECORD.
 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 6.

(1) PLACE OF BIRTH

County of SUMTER

Township of

or Inc. Town of

City of Sumter S.C.

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

(2) Full Name of Child Josephine Sigmund

File No.—For State Registrar Only

32408

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

Registration District No. 41A Registered No. 162

(For use of Local Registrar)

St. 3 Ward

3. BOY OR GIRL girl

4. Twin or Triplet?

5. Number in order of birth 1

6. Are Parents Married? married

7. DATE OF BIRTH

Sept 3 1922

FATHER.

8. FULL NAME James Sigmund

9. PRESENT POSTOFFICE OF FATHER Sumter S.C.

10. COLOR OR RACE colored (11) AGE AT LAST BIRTHDAY 34

12. BIRTHPLACE Warlington S.C.

13. OCCUPATION mail clerk

14. Number of children born to mother, including present birth 4

MOTHER.

14. NAME BEFORE MARRIAGE Willhelmina Peterson

15. PRESENT POSTOFFICE OF MOTHER Sumter S.C.

16. COLOR OR RACE colored (17) AGE AT LAST BIRTHDAY 22

18. BIRTHPLACE Sumter S.C.

19. OCCUPATION Domestic

20. 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 or stillborn on the date above stated.

(23) (Signature) Rebecca Belser Sept 3 at 10 P.M.

(24) State whether Physician or Midwife (25) Address of Physician or Midwife 708 W Barlette

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 22 is signed by mark)

(27) Filed Oct 10 1922 (28) 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.