

(1) PLACE OF BIRTH

County of Bamberg

Township of

Int. Town of

City of Bamberg

(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

No. 10.—For State Registrar Only

2865

Registration District No. Registered No. 7
(For use of Local Registrar)

(No. St. Ward)

(2) Full Name of Child

Margaret Marie Sumpster
(If child is not yet named, make supplemental report as directed)(3) Sex Girl (4) Twin or Triplet No (5) Number of children 1
To be answered only in event of Twin or Triplet (6) DATE OF BIRTH 2/14/23
(Name) (Month) (Day) (Year)

FATHER		MOTHER	
(7) FULL NAME <u>Arthur Sumpster</u>	(10) NAME BEFORE MARRIAGE <u>Ellie May Phillips</u>	(8) PRESENT RESIDENCE OF FATHER <u>Bamberg</u>	(11) PRESENT RESIDENCE OF MOTHER <u>Bamberg</u>
(9) COLOR OR RACE <u>White</u>	(12) AGE AT LAST BIRTHDAY <u>20</u> (Years)	(13) COLOR OR RACE <u>White</u>	(14) AGE AT LAST BIRTHDAY <u>16</u> (Years)
(15) BIRTHPLACE <u>Orangeburg</u>	(16) OCCUPATION <u>Salaman</u>	(17) BIRTHPLACE <u>Bamberg</u>	(18) OCCUPATION <u>Domestic</u>
(19) Number of children born to mother, including present birth <u>One</u>	(20) Number of children of this mother now living, including present birth <u>One</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(21) I hereby certify that I attended the birth of this child, who was Born alive at 5:20 A.M. on the date above stated. (Keep A. M. or P. M.)(22) (Signature) Robt Black(23) State whether Physician or Midwife Mid (24) Address of Physician or Midwife Bamberg

Given name added from a supplemental report

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

(26) Filed 2/10/23 (27) 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.

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