

(1) PLACE OF BIRTH

County of Bamberg  
 Township of Beauf. Bridge  
 or  
 Inc. Town of .....  
 or  
 City of ..... (No. .... St.; ..... Ward)  
 (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

File No. — For State Registrar Only

63101

Registration District No. 4-01 Registered No. 51  
 (For use of Local Registrar)

(2) Full Name of Child

If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? girl (4) Twin or Triplet? ..... (5) Number in order of birth 1 (6) Are Parents Married? NO (7) DATE OF BIRTH June 11 1916  
(To be answered only in case of Twins or Triplets) (Time of Month) (Day) (Year)

FATHER.

MOTHER.

(8) FULL NAME James Crumford  
 (9) PRESENT POSTOFFICE OF FATHER Blair, S.C.  
 (10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 18 (Years)  
 (12) BIRTHPLACE Bamberg  
 (13) OCCUPATION Farm laborer  
 (14) Number of children born to this father, including present birth 1

(14) NAME BEFORE MARRIAGE Maggie Williams  
 (15) PRESENT POSTOFFICE OF MOTHER Blair S.C.  
 (16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 17 (Years)  
 (18) BIRTHPLACE Bamberg  
 (19) OCCUPATION Farm laborer  
 (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 alive at 7 A M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Amenca Puller  
 (24) State whether Physician or Midwife midwife (25) Address of Physician or Midwife Blair S.C.

Given name added from a supplemental report ..... 191.....  
 Registrar

(26) Witness W. B. Ray  
 (Signature of Witness necessary only when question 23 is signed by mark)  
 (27) Filed June 28 1916 (28) W. B. Ray 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.

Registrar Only  
 Registrar  
 Ward  
 er.)  
 d, make directed  
 191-6  
 (Year)  
 75-  
 (years)  
 E.C.  
 M.  
 or P. M.)  
 Midwife  
 Registrar.  
 return. If pre the

BUREAU OF VITAL STATISTICS, No. 3, STATE OF SOUTH CAROLINA, 1916  
 REGISTERED IN CHARLOTTE