

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the
FIRST-BORN, No. 1. THIS OTHER, No. 2, etc. In question 5
RECORD COLUMN, COLUMN 5, 6.

(1) PLACE OF BIRTH

County of Sumter
Township of Sumter
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
2579

Registration District No. 4003 Registered No. 3
(For use of Local Registrar)

(2) Full Name of Child James Murray

(3) BOY OR GIRL <u>boy</u>	(4) Twin or Triplet? To be answered only in event of Twins or Triplets	(5) Number in order of birth	(6) Age Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>Jan. 15</u> 19 <u>22</u> (Month of Month) (Day) (Year)
FATHER			MOTHER	
(8) FULL NAME <u>James Murray</u>			(14) NAME BEFORE MARRIAGE <u>John Conner</u>	
(9) PRESENT POSTOFFICE OF FATHER <u>Wedgefield</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Wedgefield</u>	
(10) COLOR OR RACE <u>Col</u>			(16) COLOR OR RACE <u>Col</u>	
(11) AGE AT LAST BIRTHDAY <u>26</u> (Years)			(17) AGE AT LAST BIRTHDAY <u>25</u> (Years)	
(12) BIRTHPLACE <u>SC</u>			(18) BIRTHPLACE <u>SC</u>	
(13) OCCUPATION <u>Iron Hand</u>			(19) OCCUPATION <u>Iron Hand</u>	
(20) Number of children born to mother, including present birth <u>2</u>			(21) Number of children of this mother now living, including present birth <u>2</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was _____ St. 6 P. M.
(Born alive or stillborn) (Hour A. M. or P. M.)
on the date above stated.

(23) (Signature) <u>W. H. Conner</u>	(24) State, whether Physician or Midwife <u>Wedgefield</u>	(25) Address of Physician or Midwife <u>Wedgefield</u>
Given name added from a supplemental report		(26) Witness (Signature of Witness necessary only when question 22 is signed by mark) <u>W. H. Conner</u>
(27) Filed _____ 19 <u>22</u> (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.

Months of pregnancy _____