

(1) PLACE OF BIRTH

County of UnionTownship of Union

or

Inc. Town of Monarch

or

City of (No.)

(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

53995

Registration District No. 4-20 Registered No. 26

(For use of Local Registrar)

(2) Full Name of Child Dorinda Thomas Lambright (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL?

X

(4) Twin or Triplet?

X
To be answered only in event of twins or triplets

(5) Number in order of birth

(6) Are Parents Married?

yes

(7) DATE OF BIRTH

March 26, 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Dan Lambright

(9) PRESENT POSTOFFICE OF FATHER

Union SC

(10) COLOR OR RACE

white

(11) AGE AT LAST BIRTHDAY

28
(Years)

(12) BIRTHPLACE

Spartanburg Co SC

(13) OCCUPATION

mill work

(20) Number of children born to mother, including present birth

Four

MOTHER.

(14) NAME BEFORE MARRIAGE

Miss Davis

(15) PRESENT POSTOFFICE OF MOTHER

Union SC

(16) COLOR OR RACE

white

(17) AGE AT LAST BIRTHDAY

24
(Years)

(18) BIRTHPLACE

Union SC

(19) OCCUPATION

Domestic

(21) Number of children of this mother now living, including present birth

Three

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive (Born alive or stillborn) (Hour A. M. or P. M.)
on the date above stated.(23) (Signature) W. H. Dade

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

affid.PhysicianUnion SC

Given name added from a supplemental report

1. L. 12. 5743, 1916L. H. Rizer M.D.
Registrar

(26) Witness

(Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed

April 10, 1916

(28)

S. G. Sarratt
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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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, THE OTHER, No. 2, etc., in question 5.
 C. McCaw, of Columbia.