

N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the  
McGraw, of Columbia. FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

(1) PLACE OF BIRTH

County of Laurin

Township of Hunter

or  
Inc. Town of .....

or  
City of .....

(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

43290

Registration District NO. 2902

Registered No. 123

(For use of Local Registrar)

(2) Full Name of Child Haye L. Humphrey

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

(3) BOY OR GIRL Boy

(4) Twin or Triplet?

(5) Number in order of birth

(6) Are Parents Married yes

(7) DATE OF BIRTH Dec 11 1922

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Jim L. Humphrey

(9) PRESENT POSTOFFICE OF FATHER Clinton SC

(10) COLOR OR RACE negro

(11) AGE AT LAST BIRTHDAY 23

(Years)

(12) BIRTHPLACE SC.

(13) OCCUPATION farm laborer

(14) Number of children born to mother, including present birth 2

MOTHER.

(14) NAME BEFORE MARRIAGE Lula Pitts

(15) PRESENT POSTOFFICE OF MOTHER Clinton SC

(16) COLOR OR RACE negro

(17) AGE AT LAST BIRTHDAY 20

(Years)

(18) BIRTHPLACE SC.

(19) OCCUPATION farm laborer

(20) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was born alive at 11:50 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) L. L. W. Bailey

(24) State whether Physician or Midwife (25) Address of Physician or Midwife Midwife of Clinton SC.

Given name added from a supplemental report

(26) Witness L. L. W. Bailey

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

(27) Filed Dec 11 1922

(28) L. L. W. Bailey

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.