

(1) PLACE OF BIRTH

County of Lee
Township of Stokes Bridge

City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of Health

Registration District No. 3008

File No.—For State Registrar Only

1933 35

Registered No.
(For use of Local Registrar)

(No. St.; Ward)

If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Murriel

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

3 SEX OR GENDER Boy 4 Twin or Triplet? To be answered only in event of Twins or Triplets 5 Number in order of birth 1 6 Are Parents Married? No 7 DATE OF BIRTH June 5, 1933
(Name of Month) (Day) (Year)

FATHER.

8 FULL NAME Leah Russell

9 PRESENT POSTOFFICE OF FATHER -

10 COLOR OR RACE - (11) AGE AT LAST BIRTHDAY - (Years)

12 BIRTHPLACE -

13 OCCUPATION -

14 Number of children born to mother, including present birth 4

MOTHER.

(14) NAME BEFORE MARRIAGE Eura Muldrow

(15) PRESENT POSTOFFICE OF MOTHER #6 Bishopville Rd

(16) COLOR OR RACE Black (17) AGE AT LAST BIRTHDAY 21 (Years)

(18) BIRTHPLACE Lee Co. S.C.

(19) OCCUPATION Farmer Laborer

(21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Phillie Russell at 10 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Phillie Russell

(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife #6 Bishopville Rd

Given name added from a supplemental report

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

(27) Filed June 5, 1933 (28) R M Smith 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.