

Form No. 1

## (1) PLACE OF BIRTH

County of DillonTownship of Deeheat

or

Inc. Town of

or

City of Bingham Se.

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

Registration District No. 1606

File No. — For State Registrar Only

29978

Registered No. ....  
(For use of Local Registrar)(2) Full Name of Child W. B. Dupree

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

(3) BOY OR GIRL? Boy

(4) Twin or Triplet?

To be answered only in event of Twins or Triplets

(5) Number in order of birth

(6) Are Parents Married? No(7) DATE OF BIRTH Sept 15 22  
(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME M. E. Kinley Fulmore

(9) PRESENT POSTOFFICE OF FATHER

(10) COLOR OR RACE black(11) AGE AT LAST BIRTHDAY 25  
(Years)(12) BIRTHPLACE Not known(13) OCCUPATION Saw mill

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

## MOTHER.

(14) NAME BEFORE MARRIAGE Mattie Dupree(15) PRESENT POSTOFFICE OF MOTHER Bingham Se.(16) COLOR OR RACE black(17) AGE AT LAST BIRTHDAY 20  
(Years)(18) BIRTHPLACE house keeper

(19) OCCUPATION

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

None

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was alive at 3 P. M. on the date above stated. (Hour A. M. or P. M.)(23) (Signature) Adelux Carmichael

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Mark

Given name added from a supplemental report

(26) Witness F. M. Hatchard

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

19  
Registrar

(27) Filed

19

(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.

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 6.

RECEIVED OF GEORGIA, COLUMBIA, S. C.