

Form No. 1

(1) PLACE OF BIRTH

County of Fairfield
 Township of X 9
 or
 Inc. Town of
 or
 City of

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

38224

Registration District No. 1908 Registered No. 52
 (For use of Local Registrar)

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

(2) Full Name of Child Jessie Lurr

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

3) BOY OR GIRL? girl 4) Twin or Triplet? No 5) Number in order of birth 1 6) Are Parents Married? no 7) DATE OF BIRTH Sept. 26, 1912
 (Name of Month) (Day) (Year)

FATHER.

8) FULL NAME Louis Lurr9) PRESENT POSTOFFICE OF FATHER Winnabow10) COLOR OR RACE negro 11) AGE AT LAST BIRTHDAY 49
 (Year)12) BIRTHPLACE near Winnabow13) OCCUPATION Farming20) Number of children born to mother, including present birth not given

MOTHER.

14) NAME BEFORE MARRIAGE Miriam Uvense15) PRESENT POSTOFFICE OF MOTHER near Winnabow16) COLOR OR RACE negro 17) AGE AT LAST BIRTHDAY 39
 (Year)18) BIRTHPLACE near Winnabow19) OCCUPATION Farming21) Number of children of this mother now living, including present birth not given

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Alive at 12 P.M.
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

(24) State whether Physician or Midwife midwife(25) Address of Physician or Midwife Winnabow, S.C.

Given name added from a supplemental report

(26) Witness
 (Signature of Witness necessary only when question 23 is signed by mark)(27) Filed Nov 28 1912 (28) DeRuff 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.

MARGIN RESERVED FOR BINDING.
 STATE 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.

BUREAU OF VITAL STATISTICS, COLUMBIA, S. C.