

Form No. 1

(1) PLACE OF BIRTH

County of Sumter
 Township of Lowtown
 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

16862

Registration District No. Registered No. 38.....

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

(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? No (7) DATE OF BIRTH May 27 1922
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Illegitimate

(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

MOTHER.

(14) NAME BEFORE MARRIAGE Lizzie Brunson(15) PRESENT POSTOFFICE OF MOTHER Sumter 26 R. 1(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY.....
(Years)(18) BIRTHPLACE Ido(19) OCCUPATION at home

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

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Born alive at 3 P.M.
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Martha L. Lanning(24) State whether Physician or Midwife (25) Address of Physician or Midwife Sumter 26 R. 1

Given name added from a supplemental report

(26) Witness J. D. Kinney
(Signature of Witness necessary only when question 23 is signed by mark)(27) Filed May 29 1922 (28) Miss R. J. Kinney 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.

RECEIVED BY THE REGISTRAR OF THE BUREAU OF VITAL STATISTICS, STATE OF SOUTH CAROLINA, AT THE OFFICE OF THE REGISTRAR, COLUMBIA, S. C. THIS 29th DAY OF MAY 1922.