

(1) PLACE OF BIRTH

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No. — For State Registrar Only

42102

County of SiliconTownship of Richland

OR

Inc. Town of

OR

City of

Registration District No. 1603 Registered No. 196

(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 Margaret Chural

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

(3) BOY OR GIRL? <u>girl</u>	(4) Twin or Triplet? <u>To be answered only in event of Twins or Triplets</u>	(5) Number in order of birth	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>Dec 31 1933</u> (Name of Month) (Day) (Year)
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FATHER.

(8) FULL NAME B. Murry Chural(9) PRESENT POSTOFFICE OF FATHER Fork SC(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 39 (Years)(12) BIRTHPLACE SC(13) OCCUPATION Carpenter & farmer(20) Number of children born to mother, including present birth 5

MOTHER.

(14) NAME BEFORE MARRIAGE Bertie Bryant(15) PRESENT POSTOFFICE OF MOTHER Fork SC(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 28 (Years)(18) BIRTHPLACE SC(19) OCCUPATION House wife(21) Number of children of this mother now living, including present birth 5

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Louise at 8:20 P.M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) N. N. Seisfield(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Fork SC

Given name added from a supplemental report

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

(27) Filed Dec 31 1934 (28) N. N. Seisfield 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.