

(1) PLACE OF BIRTH

County of Sumter S.C.

Township of

Inc. Town of

City of Sumter

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

CERTIFICATE OF BIRTH

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

No. 10.—For State Registrar Only

30205

Registration District No. 41-A Registered No. 151
(For use of Local Registrar)(No. 9 8 Harwin St. 4 Ward)(2) Full Name of Child Sara D. Stephenson (If child is not yet named, make supplemental report as directed)(3) SEX OF CHILD Girl (4) Type or Weight 1144 (5) Number in order of birth 7 (6) Yes (7) DATE OF BIRTH Sept. 5 1923
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Rufus Arthur Stephenson(9) PRESENT POSTOFFICE OF FATHER Sumter S.C.(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 42
(Year)(12) BIRTHPLACE S.C.

(13) OCCUPATION

Ins. Auditor Express Co(14) Number of children born to mother, including present birth 7

MOTHER.

(15) NAME BEFORE MARRIAGE Louise Alberta Reardon(16) PRESENT POSTOFFICE OF MOTHER Sumter S.C.(17) COLOR OR RACE White (18) AGE AT LAST BIRTHDAY 28
(Year)(19) BIRTHPLACE S.C.

(20) OCCUPATION

Housewife(21) Number of children of this mother now living, including present birth 7

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(22) I hereby certify that I attended the birth of this child, who was Born alive at 1.1 P.M. on the date above stated. (Born alive or stillborn) (Hour M. or P.M.)(23) (Signature) H. H. Hood(24) State whether Physician or Midwife Physician(25) Address of Physician or Midwife Sumter S.C.

Given name added from a supplemental report

Gamie LeirayDec. 18 1923
(Month) (Year)

(26) Witness (Signature of Witness necessary only when question 22 is signed by mark)

(27) Filed Oct 5 1923 (28) D. O. Gausman 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.

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