

## (1) PLACE OF BIRTH

County of SumterTownship of Sumteror  
Inc. Town of CountryCity of Home

(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

File No. For State Registrar Only  
92051Registration District No. 408 Registered No. 192

(For use of Local Registrar)

## (2) Full Name of Child

Sharon Brignall

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

(3) BOY OR GIRL?

Boy

(4) Twin or Triplet?

(5) Number in order of birth

To be answered only in case of Twins or Triplets

(6) Are Parents Married?

Yes

(7) DATE OF BIRTH

Dec 27

(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME

Jim Brignall

(9) PRESENT POSTOFFICE OF FATHER

Sumter

(10) COLOR OR RACE

Colored

(11) AGE AT LAST BIRTHDAY

(Years)

(12) BIRTHPLACE

Elmer

(13) OCCUPATION

Plumber

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

4

## MOTHER.

(14) NAME BEFORE MARRIAGE

Claudia Withers

(15) PRESENT POSTOFFICE OF MOTHER

Sumter

(16) COLOR OR RACE

Colored

(17) AGE AT LAST BIRTHDAY

20

(Years)

(18) BIRTHPLACE

Sumter

(19) OCCUPATION

Housekeeper

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

3

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Alive at 7 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Agnes J. John

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

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Registrar

(26) Witness

Marion Withers

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

(27) Filed

Dec 27

(28)

Agnes J. John

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.