

(1) PLACE OF BIRTH

County of AndersonTownship of Honesockor
Inc. Town ofor
City of

(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. 2831Registration District No. 307 Registered No. 3
(For use of Local Registrar)(2) Full Name of Child Lita May

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

(3) SEX OF CHILD <u>Girl</u>	(4) Type of Birth <u>2</u>	(5) Number in order of birth <u>1</u>	(6) Age of Mother <u>28</u>	(7) DATE OF BIRTH <u>Feb 3 28</u>
---------------------------------	-------------------------------	--	--------------------------------	--------------------------------------

FATHER

(8) FULL NAME Will Stewart(9) PRESENT RESIDENCE OF FATHER Honesock(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 27(12) BIRTHPLACE Anderson(13) OCCUPATION Farmer(14) Number of children born to mother, including present birth 1

MOTHER

(14) NAME BEFORE MARRIAGE Inez Lumbrell(15) PRESENT RESIDENCE OF MOTHER Honesock(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 20(18) BIRTHPLACE Anderson(19) OCCUPATION Domestic(20) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(21) I hereby certify that I attended the birth of this child, who was alive on the date above stated. (22) 1030(23) (Signature) Lizie Lumbrell(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Honesock

Given name added from a supplemental report

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

(27) Signed Feb 28 1928 (28) Jesse William 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.

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.

more (sub)