

## (1) PLACE OF BIRTH

County of Richland

Township of .....

or

Inc. Town of .....

or

City of Columbia S.C.

(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

2840Registration District No. 38Registered No. 1032

(For use of Local Registrar)

(2) Full Name of Child Luan Ray Hammond

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

(3) BOY OR GIRL

Boy

(4) Twin or Triplet

To be answered only in event of Twins or Triplets

(5) Number in order of birth

1

(6) Age Parents Married

Yr

(7) DATE OF BIRTH

Jan 14 22

## FATHER

(8) FULL NAME

Elitcher L Hammond

(9) PRESENT POSTOFFICE OF FATHER

Columbia S.C. (Camp P)

(10) COLOR OR RACE

W

(11) AGE AT LAST BIRTHDAY

45

(Years)

(12) BIRTHPLACE

S.C.

(13) OCCUPATION

Merchant

## MOTHER

(14) NAME BEFORE MARRIAGE

Camie Jane Pittman

(15) PRESENT POSTOFFICE OF MOTHER

Columbia

(16) COLOR OR RACE

W

(17) AGE AT LAST BIRTHDAY

38

(Years)

(18) BIRTHPLACE

S.C.

(19) OCCUPATION

House wife

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

Eleven

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

Eight

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was

bornat 2:45 P.M.on the date above stated.(Hour of day)

(23) (Signature)

D.M. Matthews M.D.

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from supplemental report

(26) Witness

(Signature when questioned)

E. C. C. C. C.

(27) Registrar

(28) Filed 1-23 1922

(29) 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.

Supplemental report

(Date of)

Registrar

Address Madras S.C.

Mother

Filed SEP 15 1941

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Martin B. Woodward M.D.