

1) PLACE OF BIRTH

County of Sumter

Township of

or

City, Town or

or

City of Sumter(No. 1 St.; 2 Ward)

Birth occurs in a hospital or other institution (Give name of same instead of street and number.)

2) Full Name of Child Marion Graham

File No. — For State Registrar Only

74846

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

Registration District No. 41A Registered No. 135

(For use of Local Registrar)

(No. 1 St.; 2 Ward)

Birth occurs in a hospital or other institution (Give name of same instead of street and number.)

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

BOY OR GIRL? <u>Girl</u>	(4) Twin or Triplet? <u>No</u>	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Aug 9 1916</u> (Name of Month) (Day) (Year)
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FATHER.

FULL NAME James D. GrahamPRESENT POSTOFFICE OF FATHER Sumter S.C.COLOR OR RACE White (ii) AGE AT LAST BIRTHDAY (Years)BIRTHPLACE S.C.OCCUPATION Mechanical RepairNumber of children born to mother, including present birth { ... 1 ... }

MOTHER.

(14) NAME BEFORE MARRIAGE Leatrice Knight(15) PRESENT POSTOFFICE OF MOTHER Sumter S.C.(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY (Years)(18) BIRTHPLACE S.C.(19) OCCUPATION Wife(21) Number of children of this mother now living, including present birth { ... 1 ... }

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

22) I hereby certify that I attended the birth of this child, who was born at Sumter S.C. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) J. W. McLean

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

Physician Sumter S.C.

Given name added from a supplemental report

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

Sept 9 1916 (27) Filed (28) W. J. D. Kuper Local Registrar.

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.