

File No.—For State Registrar Only
48698

(3) BOY OR GIRL? <u>Boy</u>	(4) <u>Twin</u> or Triplet?	(5) Number in order of birth <u>4</u>	(6) Are Parents Married?	(7) DATE OF BIRTH <u>Feb 13 1916</u>
To be answered only in event of Twin or Triplet				(Name of Month) (Day) (Year)

(14) NAME BEFORE MARRIAGE MOTHER.
Lusie Breland

(15) PRESENT POSTOFFICE OF MOTHER *Char. S.C.*

(16) COLOR OR RACE Black (17) AGE AT LAST BIRTHDAY 23 (Years)

(18) BIRTHPLACE Bamberg, Co. S.C.

(19) OCCUPATION Harbor Laborer

(21) Number of children of this mother
now living, including present birth } 4.....

(22) I hereby certify that I attended the birth of this child, who was alive, at 10 M.,
on the date above stated, (born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) E. A. Hume, Jr.
 (24) State whether Physician or Midwife _____ (25) Address of Physician or Midwife _____

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

(27) Filed Feb 10 1940 (28) 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.