

(1) PLACE OF BIRTH

County of Lynchburg
 Township of Lynchburg
 or
 Inc. Town of.....
 or
 City of.....

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
 Bureau of Vital Statistics
 State Board of Health

File No.—For State Registrar Only

19309

Registration District No. 3002 Registered No. 72
 (For use of Local Registrar)

(No. St.; Ward)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child

James R. Ingram

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

3) BOY OR GIRL Boy 4) Twin or Triplet? No 5) Number in order of birth 1 6) Are Parents Married? yes 7) DATE OF BIRTH June 12 1930
 (Name of Month) (Day) (Year)

FATHER.

8) FULL NAME James C. Ingram
 9) PRESENT POSTOFFICE OF FATHER South Lynchburg S.C.
 10) COLOR OR RACE White 11) AGE AT LAST BIRTHDAY 34 (Years)
 12) BIRTHPLACE Lynchburg County
 13) OCCUPATION Farmer in hardwood
 14) Number of children born to mother, including present birth 4

MOTHER.

14) NAME BEFORE MARRIAGE Bessie Rogers
 15) PRESENT POSTOFFICE OF MOTHER South Lynchburg S.C.
 16) COLOR OR RACE White 17) AGE AT LAST BIRTHDAY 29 (Years)
 18) BIRTHPLACE Clarendon County
 19) OCCUPATION Domestic
 20) Number of children of this mother now living, including present birth 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

22) I hereby certify that I attended the birth of this child, who was born alive at 5 a.m., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

23) (Signature) F. M. Griffin M.D.
 24) State whether Physician or Midwife 25) Address of Physician or Midwife Lynchburg S.C.

Given name added from a supplemental report

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

27) Filed 6/12/30 1930 28) J. F. McIntosh 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.