

(1) PLACE OF BIRTH

County of Sumter
 Township of Shiloh
 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

16931

Registration District No. 4107Registered No. 55
(For use of Local Registrar)

City of (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 Valentine Chandler (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 May 29, 1922
 (State of Month) (Day) (Year)

FATHER		MOTHER	
(8) FULL NAME <u>Lam Chandler</u>	(14) NAME BEFORE MARRIAGE <u>Junia Green</u>		
(9) PRESENT POSTOFFICE OF FATHER <u>Lynchburg, Va</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Lynchburg, Va</u>		
(10) COLOR OR RACE <u>Negro</u>	(16) COLOR OR RACE <u>Negro</u>	(11) AGE AT LAST BIRTHDAY <u>32</u> (Years)	(17) AGE AT LAST BIRTHDAY <u>25</u> (Years)
(12) BIRTHPLACE <u>Sumter Co</u>	(18) BIRTHPLACE <u>Sumter Co</u>		
(13) OCCUPATION <u>Farming</u>	(19) OCCUPATION <u>Housework</u>		
(20) Number of children born to mother, including present birth <u>4</u>	(21) Number of children of this mother now living, including present birth <u>4</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Alive at 9 A.M. on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)

(23) (Signature) Alace McElver
 (24) State whether Physician or Midwife Midwife (25) Signature of Physician or Midwife Shiloh, Va

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
 (27) Filed 6-5-22 (73) S.D. McElver 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.