

(1) PLACE OF BIRTH

County of *Leicesterfield*Township of *Old Stone*

or

Inc. Town of

or

City of

(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

45836

Registration District No. *4-2-06* Registered No. *17*

(For use of Local Registrar)

(2) Full Name of Child

Leames

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

(3) BOY OR GIRL?

girl

(4) Twin or Triplet?

(5) Number in order of birth *9th*

(6) Are Parents Married?

(7) DATE OF BIRTH

Jan 18, 1906

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

John L. Leames

(9) PRESENT POSTOFFICE OF FATHER

Monroe, N.C.

(10) COLOR OR RACE

W

(11) AGE AT LAST BIRTHDAY

42
(Years)

(12) BIRTHPLACE

S.C.

(13) OCCUPATION

Hammer

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

8

MOTHER.

(14) NAME BEFORE MARRIAGE

Della Key

(15) PRESENT POSTOFFICE OF MOTHER

Monroe, N.C.

(16) COLOR OR RACE

W

(17) AGE AT LAST BIRTHDAY

48
(Years)

(18) BIRTHPLACE

S.C.

(19) OCCUPATION

House wife

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

8

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was *born alive* at *2:45 P.M.* on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) *L. J. Gundersen, M.D.*

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

Leicesterfield, S.C.

Given name added from a supplemental report

, 191....

Registrar

(26) Witness

(Signature of Witness necessary only when question 23 is signed by a clerk)

(27) Filed

191....

(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.

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