(1) PLACE OF BIRTH

County of Sumter

Township of Concord

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
91965

Registration District No. 4.100 Registered No. 123
(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 Lucial McFadden (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL? Girl

(4) Twin or Triplet? 1

(5) Number in order of birth 1

To be answered only in event of Twins or Triplets

(6) Are Parents Married? Yes

(7) DATE OF BIRTH Dec. 10 19 16 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME John McFadden

(9) PRESENT POSTOFFICE OF FATHER Sumter

(10) COLOR OR RACE Negro

(11) AGE AT LAST BIRTHDAY 40 (Years)

(12) BIRTHPLACE D. K.

(13) OCCUPATION ~~Saw Mill~~ Saw-mill.

(20) Number of children born to mother, including present birth 4

MOTHER.

(14) NAME BEFORE MARRIAGE Lillar Perry

(15) PRESENT POSTOFFICE OF MOTHER Sumter

(16) COLOR OR RACE Negro

(17) AGE AT LAST BIRTHDAY 35 (Years)

(18) BIRTHPLACE D. K.

(19) OCCUPATION ~~Farming~~ Farming

(21) 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 alive (Born alive or stillborn) at 8 P. M., (Hour A. M. or P. M.) on the date above stated.

(23) (Signature) Jennie Richardson

(24) State whether Physician or Midwife Midwife.

(25) Address of Physician or Midwife Jennie Richardson Sumter S.C.

Given name added from a supplemental report

..... 19 ....
Registrar

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

(27) Filed Dec. 1 1916. (28) [illegible]
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.