

(1) PLACE OF BIRTH

County of Anderson

Township of

or

Inc. Town of

or

City of Anderson

(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

6363

Registration District No. 3ARegistered No. 94
(For use of Local Registrar)(No. 1031 S. Fant St.; Ward)(2) Full Name of Child David Alton Brumlee

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

(3) BOY OR
GIRL(4) Twin-
or Triplet? 5

To be answered only in event of Twins or Triplets

(5) Number in
order of birth 4(6) Are
Parents
Married? yes(7) DATE OF
BIRTH Mar 12 1912
(Name of Month) (Day) (Year)

FATHER.

(8) FULL
NAME W. S. Brumlee(9) PRESENT
POSTOFFICE
OF FATHER 1031 S. Fant St
Anderson SC(10) COLOR
OR
RACE col(11) AGE AT LAST
BIRTHDAY 28
(Years)(12) BIRTHPLACE And Co.(13) OCCUPATION Presser(20) Number of children born to
mother, including present birth 4

MOTHER.

(14) NAME BEFORE
MARRIAGE Anne Brumlee(15) PRESENT
POSTOFFICE
OF MOTHER 1031 S Fant St
Anderson SC(16) COLOR
OR
RACE col(17) AGE AT LAST
BIRTHDAY 26
(Years)(18) BIRTHPLACE And Co.(19) OCCUPATION mb(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 born at 3 P. M.,
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) W. S. Brumlee

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemen-
tal report

(26) Witness

(Signature of Witness necessary only
when question 23 is signed by mark)E. B. CRAYTON,

(27) Filed

(28)

ANDERSON 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.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.