

(1) PLACE OF BIRTH

County of Archland

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

37410

Township of

Inc. Town of

City of Columbia

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

Registration District No. 382Registered No. 941

(For use of Local Registrar)

(2) Full Name of Child Emily Mary Lee Hammond

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

(3) BOY OR GIRL? Y. (4) Twin or Triplet? 1 (5) Number in order of birth 1 (6) Are Parents Married? Y. (7) DATE OF BIRTH Nov. 16, 1923 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Samuel Edward Hammond(9) PRESENT POSTOFFICE OF FATHER Columbia(10) COLOR OR RACE W. (11) AGE AT LAST BIRTHDAY 21 (Years)(12) BIRTHPLACE Columbia, S.C.(13) OCCUPATION Asst Manager Theatre(14) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Margaret Madden(15) PRESENT POSTOFFICE OF MOTHER Columbia, S.C.(16) COLOR OR RACE W. (17) AGE AT LAST BIRTHDAY 19 (Years)(18) BIRTHPLACE Greenville, S.C.(19) OCCUPATION H.W.(21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) J. H. Hubbard, M.D.(24) State whether Physician or Midwife (25) Address of Physician or Midwife Columbia, S.C.

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 22 is signed by mark)

(27) Filed 12/15/23 (28) J. H. Hubbard 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.

With month of pregnancy.

Register.

WRITE PLAINLY. WITH UNFADING INK.—THIS IS A PERMANENT RECORD.
N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the FIRST-BORN, No. 1, THE OTHER, No. 2, etc., in question 1.

McCay, of Columbia