

## (1) PLACE OF BIRTH

County of Marion  
 Township of .....  
 or  
 Inc. Town of Marion  
 or  
 City of .....

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA  
 Bureau of Vital Statistics  
 State Board of Health

File No. - For State Registrar Only

31232

Registration District No. 32-9 Registered No. 72  
 (For use of Local Registrar)

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

(2) Full Name of Child Lamellus V. Berry Jr. (No. .... St. .... Ward)   
 If child is not yet named, make supplemental report as directed

(1) BOY OR GIRL Boy (4) Twin or Triplet? One (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Sept 29 19 27  
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

## FATHER

(8) FULL NAME Lamellus V. Berry

(9) PRESENT POSTOFFICE OF FATHER Marion S.C.

(10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 24 (Years)

(12) BIRTHPLACE .....

(13) OCCUPATION .....

Farmer

(14) Number of children born to mother, including present birth 1

## MOTHER

(14) NAME BEFORE MARRIAGE Maggie L. Richardson

(15) PRESENT POSTOFFICE OF MOTHER Marion

(16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 29 (Years)

(18) BIRTHPLACE .....

(19) OCCUPATION Teacher

Teaching

(20) Number of children of this mother now living, including present birth 1

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(21) I hereby certify that I attended the birth of this child, who was born 1:30 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(22) (Signature) Dr. Wm. J. ...

(23) State whether Physician or Midwife Midwife (24) Address of Physician or Midwife Marion S.C.

Given name added from a supplemental report

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

(26) Filed Oct. 10 19 27 (27) Anna M. Montgomery 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.