

(1) PLACE OF BIRTH

County of Greenville
 Township of Sho. Grove
 Inc. Town of
 City of (No. St. Ward)

CERTIFICATE OF BIRTH

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

No. 10.—For State Registrar Only

12083

Registration District No. 400Registered No. 2738
(For use of Local Registrar)

(2) Full Name of Child

Lamie Ruth Suman

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

3 SEX OR
CHILDgirl(4) Twin
or Triplet

—

(5) Number in
order of birth

1

(6) Are
Parents
Marriedyes

(7) DATE OF

BIRTH 12/25/23
(Name of Month) (Day) (Year)

FATHER.

(8) FULL
NAMEOliver Benjamin Suman(9) PRESENT
POSTOFFICE
OF FATHERWadsworth R. F. E.(10) COLOR
OR
RACEwhite(11) AGE AT LAST
BIRTHDAY21
(Year)

(12) BIRTHPLACE

Pamlico S. C.

(13) OCCUPATION

Farmer(14) Number of children born to
mother, including present birth1 and

MOTHER.

(14) NAME BEFORE
MARRIAGEElizabeth Kunkel(15) PRESENT
POSTOFFICE
OF MOTHERWadsworth R. F. E.(16) COLOR
OR
RACEwhite(17) AGE AT LAST
BIRTHDAY18
(Year)

(18) BIRTHPLACE

Wadsworth S. C.

(19) OCCUPATION

Housewife(20) Number of children of this mother
now living, including present birth1 and

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(21) I hereby certify that I attended the birth of this child, who was born alive at 2:30 M.,
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(22) (Signature) C. C. Smith

(23) State whether Physician or Midwife

(24) Address of Physician or Midwife

Sho. Grove S. C.Given name added from a supplement
report

(25) Witness

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

(27) Filed

May 619 28

(28)

Mrs. J. C. White

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.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.