

(1) PLACE OF BIRTH

County of SumterTownship of Mayesville

or Inc. Town of

or City of

(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 Use
43081Registration District No. 4102 Registered No. 93
(For use of Local Registrar)(2) Full Name of Child Sarah Wilson (If child is not yet named, make supplemental report as directed)(3) Sex Female (4) Twin or Triplet No (5) Number in order of birth 1 (6) Are Parents Married Yes (7) DATE 11/3/23 (8) MONTH 11 (9) DAY 3 (10) YEAR 1923
(Name of Month) (Day) (Year)

| FATHER | | MOTHER | |
|---|---|---|---|
| (11) FULL NAME <u>Ernest Wilson</u> | (14) NAME BEFORE MARRIAGE <u>Ella Slaughter</u> | (12) PRESENT RESIDENCE OF FATHER <u>Mayesville SC</u> | (15) PRESENT RESIDENCE OF MOTHER <u>Mayesville SC</u> |
| (13) COLOR OR RACE <u>Col</u> | (16) COLOR OR RACE <u>Col</u> | (17) AGE AT LAST BIRTHDAY <u>40</u> | (18) AGE AT LAST BIRTHDAY <u>38</u> |
| (19) BIRTHPLACE <u>SC</u> | (21) BIRTHPLACE <u>SC</u> | (22) OCCUPATION <u>Railroad Hand</u> | (23) OCCUPATION <u>Housewife</u> |
| (24) Number of children born to mother, including present birth <u>11</u> | (25) Number of children of this mother now living, including present birth <u>9</u> | | |

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(26) I hereby certify that I attended the birth of this child, who was born alive & stillborn (Born alive & stillborn) (Date A. M. or P. M.)
on the date above stated.(27) (Signature) Beth Alexander(28) State whether Physician or Midwife Midwife(29) Address of Physician or Midwife Mayesville SC

Given name added from a supplemental report

(30) Witness (Signature of Witness necessary only when question 26 is signed by parent)

(31) Filed Nov 3 1923 (32) (33) (34) (35) (36) (37) (38) (39) (40) (41) (42) (43) (44) (45) (46) (47) (48) (49) (50)

*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 stillborns before the fifth month of pregnancy.