

(1) PLACE OF BIRTH

County of SumterTownship of 13or
Inc. Town of 11or
City of 11

(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

Registration District No. 41a

File No.—For State Registrar Only

79401

Registered No. 1.69
(For use of Local Registrar)(No. 11 Church St.; 2 Ward)(2) Full Name of Child Clifton Minard Brown If child is not yet named, make supplemental report as directed(3) BOY OR GIRL? boy (4) Twin or Triplet? 1 (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Sept. 4, 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME John Clifton Brown(9) PRESENT POSTOFFICE OF FATHER Sumter(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 23 (Years)(12) BIRTHPLACE Pinewood P.C.(13) OCCUPATION Electrician(20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Houma Mary Dietmar(15) PRESENT POSTOFFICE OF MOTHER Sumter(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 24 (Years)(18) BIRTHPLACE Zanesville Ohio(19) OCCUPATION Housewife(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 alive at 9:10 AM.
(Born alive or stillborn) (Hour A. M. or P. M.)
on the date above stated.(23) (Signature) Arthur Chas. M.D.(24) State whether Physician or Midwife physician(25) Address of Physician or Midwife Sumter S.C.

Given name added from a supplemental report

(26) Witness

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

(27) Filed Sept 15, 1916

(28)

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.

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