

No. 1.

(1) PLACE OF BIRTH

County of Sumter
 Township of Providence
 or
 Inc. Town of
 or
 City of RAWIN (No. St. Ward)

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

File No.—For State Registrar Only

79473

Registration District No. 4160 SRegistered No. 123
(For use of Local Registrar)

(2) Full Name of Child Rawlin Washington (If birth occurs in a hospital or other institution, give name of same instead of street and number.)
 (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth 1st (6) Are Parents Married? Yes (7) DATE OF BIRTH Sept 12, 1916
 (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME Richard Washington
 (9) PRESENT POSTOFFICE OF FATHER Dalzell S.C.
 (10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 21 (Years)
 (12) BIRTHPLACE S.C.
 (13) OCCUPATION Farmer Hand

MOTHER.
 (14) NAME BEFORE MARRIAGE Lelia Knox
 (15) PRESENT POSTOFFICE OF MOTHER Dalzell S.C.
 (16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 20 (Years)
 (18) BIRTHPLACE S.C.
 (19) OCCUPATION Domestic
 (21) Number of children of this mother now living, including present birth 1

(20) Number of children born to mother, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at S. P. M. (Hour A. M. or P. M.)
 on the date above stated.

(23) (Signature) Martha Maule Dyson
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Dalzell S.C.

Given name added from a supplemental report
 (26) Witness Mrs. Eva Burkett (Signature of Witness necessary only when question 23 is signed by mark)
 (27) Filed 9-21-1916 (28) B. M. Langhlin 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.