

CERTIFICATE OF BIRTH

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

File No. For State Registrar Only

66408

(1) PLACE OF BIRTH
County of Sumter
Township of Privateer

Inc. Town of Registration District No. 4104 Registered No. 61
(For use of Local Registrar)
City of (No. St.; Ward)
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Lied unnamed Mack If child is not yet named, make supplemental report as directed

(3) BOY or GIRL Girl (4) Twin or Triplet? No (5) Number in order of birth (6) Are Parents Married? Yes (7) DATE OF BIRTH June 6th 1916
(Name of Month) (Day) (Year)

FATHER		MOTHER	
(8) FULL NAME <u>Illie Mack</u>	(14) NAME BEFORE MARRIAGE <u>Candis Holiday</u>	(9) PRESENT POSTOFFICE OF FATHER <u>Sumter S.C. R#2</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Sumter S.C. R#2</u>
(10) COLOR OR RACE <u>Negro</u>	(11) AGE AT LAST BIRTHDAY <u>26</u> (Years)	(16) COLOR OR RACE <u>Negro</u>	(17) AGE AT LAST BIRTHDAY <u>20</u> (Years)
(12) BIRTHPLACE <u>Sumter Co. S.C.</u>	(18) BIRTHPLACE <u>Sumter Co. S.C.</u>	(19) OCCUPATION <u>Farming</u>	(20) OCCUPATION <u>Housework</u>
(21) Number of children born to mother, including present birth <u>1</u>	(22) Number of children of this mother now living, including present birth <u>1</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) Signature Agness Anderson (24) State whether Physician or Midwife Midwife (25) Signature of Physician or Midwife Sumter S.C. R#2

Given name added from a supplemental report

(26) Witness Silas B. Noth (Signature of Witness necessary only when question 23 is signed by mark)

on File June 12th 1916 by Silas B. Noth 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.