(1) PLACE OF BIRTH

County of Sumter

Township of Pinewood

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

Registration District No. 4104 Registered No. 150
(For use of Local Registrar)

(No. ..... St.; ..... Ward)

File No.—For State Registrar Only
91996

(2) Full Name of Child Ella Mitterspoor

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

(3) BOY OR GIRL: Girl

(4) Twin or Triplet? To be answered only in event of Twins or Triplets

(5) Number in order of birth

(6) Are Parents Married? yes

(7) DATE OF BIRTH Dec 23 1916 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Robert Mitterspoor

(9) PRESENT POSTOFFICE OF FATHER Tuidal S.C.

(10) COLOR OR RACE Brown

(11) AGE AT LAST BIRTHDAY 50 (Years)

(12) BIRTHPLACE A.C.

(13) OCCUPATION Farmer

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

MOTHER.

(14) NAME BEFORE MARRIAGE Katy Mitterspoor

(15) PRESENT POSTOFFICE OF MOTHER Tuidal S.C.

(16) COLOR OR RACE Brown

(17) AGE AT LAST BIRTHDAY 35 (Years)

(18) BIRTHPLACE A.C.

(19) OCCUPATION Girl House Wife

(21) Number of children of this mother now living, including present birth (Ten)

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive (Born alive or stillborn) at 8 P. M. (Hour A. M. or P. M.) on the date above stated.

(23) (Signature) Mary Pearson

(24) State whether Physician or Midwife Midwife

(25) Address of Physician or Midwife Tuidal S.C.

Given name added from a supplemental report

..... 19 ....
Registrar

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

(27) Filed Feb 30 1916 (28) James E Boyd
Local Registrar

*When there was no attending physician or midwife, then the father, householder, etc., should make the 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.