

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No. — For State Registrar Only

74866

(1) PLACE OF BIRTH

County of Sumter S.C.

Township of Concord

or
Inc. Town of

or
City of

Registration District No. 4100 Registered No. 74

(For use of Local Registrar)

(If birth occurs in a hospital or other institution give name of same instead of street and number.)

(2) Full Name of Child Vertelle Carter } If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? <u>Full</u>	(4) Twin or Triplet? <u>No.</u>	(5) Number in order of birth	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>August 1</u>
To be answered only in event of Twins or Triplets			Married	(Name of Month) (Day) 191 <u>6</u> (Year)

FATHER.

(8) FULL NAME Frank Carter

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

(10) COLOR OR RACE Colad (11) AGE AT LAST BIRTHDAY 29 (Years)

(12) BIRTHPLACE Sumter S.C.

(13) OCCUPATION Framing

(20) Number of children born to mother, including present birth 6

MOTHER.

(14) NAME BEFORE MARRIAGE Jannie Cosby

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

(16) COLOR OR RACE Colad (17) AGE AT LAST BIRTHDAY 25 (Years)

(18) BIRTHPLACE Sumter

(19) OCCUPATION Framing

(21) Number of children of this mother now living, including present birth 5

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) Sally White

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Midwife | Sumter S.C.

Given name added from a supplemental report

Frank Beard, 191.....

R. F. de S. Cal 25 Registrar

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

(27) Filed Aug 4 1916 (28) One O. C. ... 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.

MARGIN RESERVED FOR BINDING. WRITE PLAINLY. WITH UNFADING INK—THIS IS A PERMANENT RECORD.

N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

McCaw, of Columbia.