

IN CASE OF DEATH OF CHILD, THIS CERTIFICATE MUST BE FILED WITH THE CORP. TAX RETURN, No. 2, also, in question 6, "Where or Collected," Column 9, 5.

(1) PLACE OF BIRTH

County of Sumter
Township of Providence
or
Inc. Town of
or
City of

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

9303

Registration District No. 4105 Registered No. 25
(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 Mark Butler

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

(3) BOY OR GIRL Boy (4) Twin no (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH march 26 22
(Name of Month) (Day) (Year)

FATHER

(8) FULL NAME Warren Butler
(9) PRESENT POSTOFFICE OF FATHER Dalzell S.C.
(10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 41
(Year) (12) BIRTHPLACE S.C.
(13) OCCUPATION Farmer
(20) Number of children born to mother, including present birth 5

MOTHER

(14) NAME BEFORE MARRIAGE Marie Louie
(15) PRESENT POSTOFFICE OF MOTHER Dalzell S.C.
(16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 27
(Year) (18) BIRTHPLACE S.C.
(19) OCCUPATION Housewife
(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 alive at 5 P.M.
on the date above stated. (Born alive or stillborn) (Hour A. or P. M.)

(23) (Signature) Sarah Ann Mitchell
(24) State whether Physician Midwife (25) Address of Physician or Midwife
Midwife Dalzell S.C.

Given name added from a supplemental report

(26) Witness Mrs. Eva Binkert
(Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed march 31 1922 (28) J. B. Raffield
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.