

(1) PLACE OF BIRTH **CERTIFICATE OF BIRTH**
 County of Darlington STATE OF SOUTH CAROLINA.
 Bureau of Vital Statistics
 Township of Darlington State Board of Health

File No.—For State Registrar Only
45973

Inc. Town of Registration District No. 1591 Registered No.
 (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 William Carratt } If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Boy (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? yes (7) DATE OF BIRTH Jan. 13 1916
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME William Carratt

(9) PRESENT POSTOFFICE OF FATHER Darlington SC

(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 40 (Years)

(12) BIRTHPLACE Darlington Co

(13) OCCUPATION id. Klier

(20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Marie Muijer

(15) PRESENT POSTOFFICE OF MOTHER Darlington SC

(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 8 (Years)

(18) BIRTHPLACE Darlington Co

(19) OCCUPATION domestic

(21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was live at 530 A.M., on the date above stated. (Born alive, or stillborn) (Hour & M. or P. M.)

(23) (Signature) Samuel Satterway

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

Midwife, Darlington SC

Given name added from a supplemental report

(26) Witness Ed. Carr

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

(27) Filed 1/21 1916 (28) Ed. Carr 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.

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