

Form No 1.

## (1) PLACE OF BIRTH

County of Fairfield  
Township of #1

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

42713

Inc. Town of ..... Registration District No. #1900 Registered No. #94  
(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 Mary Cissley Sims } If child is not yet named, make supplemental report as directed(3) BOY OR GIRL? girl (4) Twin or Triplet? ..... (5) Number in order of birth ..... (6) Are Parents Married? yes (7) DATE OF BIRTH Dec 15 1925  
(Name of Month) (Day) (Year)

## FATHER

(8) FULL NAME Lee Sims  
(9) PRESENT POSTOFFICE OF FATHER Blairs S.C  
(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 28 (Years)  
(12) BIRTHPLACE Fairfield Co. S.C.  
(13) OCCUPATION Farm laborer  
(20) Number of children born to mother, including present birth 3

## MOTHER

(14) NAME BEFORE MARRIAGE Carrie Brooks  
(15) PRESENT POSTOFFICE OF MOTHER Blairs S.C  
(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 29 (Years)  
(18) BIRTHPLACE Fairfield Co. S.C.  
(19) OCCUPATION Housewife  
(21) Number of children of this mother now living, including present birth 3

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was alive at 4 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Sis. Crosby (24) State whether Physician or Midwife (25) Address of Physician or Midwife Blairs S.C.

Given name added from a supplemental report

(26) Witness H. G. Colvin  
(Signature of Witness necessary only when question 23 is signed by mark)(27) FILED Dec 23 1925 (28) H. G. Colvin 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.

MARRIAGE LICENSES—THIS IS A PREPARATION OF RECORDS  
WRITE PLAINLY, WITH UNFADING INK—THIS IS A PREPARATION OF RECORDS  
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.  
McGraw-Hill of Columbia