

See also No. 9344

(1) PLACE OF BIRTH

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

CERTIFICATE OF BIRTH

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

File No. - For State Registrar Only

9342

Registration District No. 7th Registered No. 49  
(For use of Local Registrar)

(2) Full Name of Child J. Ames Mitchell

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 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Mar. 21, 1922  
To be answered only in case of Twins or Triplets (Name of Month) (Day) (Year)

FATHER:  
(8) FULL NAME David Mitchell  
(9) PRESENT POSTOFFICE OF FATHER Sumter S.C.  
(10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 24 (Year)  
(12) BIRTHPLACE Antstburg S.C.  
(13) OCCUPATION Farm Labor  
(20) Number of children born to mother, including present birth 4

MOTHER:  
(14) NAME BEFORE MARRIAGE Lucile McLaughlin  
(15) PRESENT POSTOFFICE OF MOTHER Sumter  
(16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 21 (Year)  
(18) BIRTHPLACE Oswego S.C.  
(19) OCCUPATION Household  
(21) Number of children of this mother now living, including present birth One

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Alive at 4 AM. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Conalia Albert  
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Route 4 Box 12 Sumter

Given name added from a supplemental report

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

(27) Filed (28) 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.

MACHINE REPRODUCED FOR RECORDING. WRITE PLAINLY WITH UNFADING INK - THIS IS A PERMANENT RECORD. In case of TWINS OR TRIPLETS use a SEPARATE HEAVY PAPER FOR EACH CHILD, and mark the FIRST-BORN, No. 1, THE OTHER, No. 2, etc., in question 5. See also columns 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28.