

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

File No. For State Registrar Only
 79394

(1) PLACE OF BIRTH
 County of *Sumter*
 Township of
 or
 Inc. Town of *Sumter*
 or
 City of *Sumter*
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

Registration District No. *18 Edwards* Registered No. *161*
 (For use of Local Registrar)
 St. *3* (Ward)

(2) Full Name of Child *James Rossard*

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 *Sept. 17, 1916*
 (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME *Richard Rossard*
 (9) PRESENT POSTOFFICE OF FATHER *Sumter SC*
 (10) COLOR OR RACE *Col* (11) AGE AT LAST BIRTHDAY (Years)
 (12) BIRTHPLACE *Sumter SC*
 (13) OCCUPATION *Public Hackman*
 (20) Number of children born to mother, including present birth *5*

MOTHER.
 (14) NAME BEFORE MARRIAGE *Whelema*
 (15) PRESENT POSTOFFICE OF MOTHER *Sumter SC*
 (16) COLOR OR RACE *Col* (17) AGE AT LAST BIRTHDAY (Years)
 (18) BIRTHPLACE *Sumter SC*
 (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 *born alive* at M.
 (Born alive or stillborn) (Hour A.M. or P.M.)
 on the date above stated.

(23) (Signature) *Leticia Nathaniel*
 (24) State whether Physician or Midwife *Midwife* (25) Address of Physician or Midwife *Sumter SC*

Given name added from a supplemental report

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 Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
 (27) Filed *Sept 16 1916* (28) *L. J. McKoy* 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.

BUREAU OF VITAL STATISTICS, STATE OF SOUTH CAROLINA, COLUMBIA, S. C.