

# CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only  
**32461**

## (1) PLACE OF BIRTH

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

Registration District No. 4.1.05 Registered No. 83  
(For use of Local Registrar)

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

(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Sept 1 1922  
(Name of Month) (Day) (Year)

FATHER  
(8) FULL NAME John Jenkins

(9) PRESENT POSTOFFICE OF FATHER Darzell S.C.

(10) COLOR OR RACE Col (11) AGE AT LAST BIRTHDAY 2 1/2  
(Year)

(12) BIRTHPLACE S.C.

(13) OCCUPATION Farmer

(20) Number of children born to mother, including present birth 4-3

MOTHER  
(14) NAME BEFORE MARRIAGE Estelle Curtis

(15) PRESENT POSTOFFICE OF MOTHER Darzell S.C.

(16) COLOR OR RACE Col (17) AGE AT LAST BIRTHDAY 2 1/2  
(Year)

(18) BIRTHPLACE 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 10:00 M.  
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Sarah Ann Mitchell

(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Darzell S.C.

Given name added from a supplemental report

(26) Witness Mrs. Eva Burkett  
(Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed Sept 7 1922 (28) J.B. Pafford 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.

REASON FOR NOT BINDING. WHITE PLAINLY. WITH UNFADING INK—THIS IS A PERMANENT RECORD. 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.