

Form No. 1

(1) PLACE OF BIRTH

County of

Township of

or

Inc. Town of

or

City of

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

63261

Registration District No. 705 Registered No. 35

(For use of Local Registrar)

(2) Full Name of Child Mary Mitchell

{ 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

To be answered only in case of twins or triplets

(6) Are Parent Married?

yes

(7) DATE OF BIRTH

June 21, 1916

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Ben Mitchell

(9) PRESENT POSTOFFICE OF FATHER

Pineville, S.C.

(10) COLOR OR RACE

Colored

(11) AGE AT LAST BIRTHDAY

37

(12) BIRTHPLACE

Berkley Co

(13) OCCUPATION

Farmer

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

5

MOTHER.

(14) NAME BEFORE MARRIAGE

Julia Gadsden

(15) PRESENT POSTOFFICE OF MOTHER

Pineville, S.C.

(16) COLOR OR RACE

Colored

(17) AGE AT LAST BIRTHDAY

25

(18) BIRTHPLACE

Berkley Co

(19) OCCUPATION

Housewife

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

4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) Sully X. Washington

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

Midwife Pineville, S.C.

Given name added from a supplemental report

(25) Witness R. M. Bayliss

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

(26) July 1, 1916 (28) R. M. Bayliss

Local Registrar

WRITE PLAINLY, WITH INK—THIS IS A PERMANENT RECORD.
N. B.—In case of TWINS or TRIPLETS use a SEPARATE BLANK for each child, and make the FIRST-BORN, No. 1, THE OTHER, No. 2, etc., in question 5.
McGraw-Hill Co.

*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.