

Form No. 1.

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only
75111

(1) PLACE OF BIRTH
County of Williamsburg
Township of Sutters
or
Inc. Town of
or
City of

Registration District No. 4312 Registered No. 26
(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. Estu Taylor
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? no
(7) DATE OF BIRTH Aug 8th 1916
(Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME Jesse Sampson
(9) PRESENT POSTOFFICE OF FATHER Sutters SC
(10) COLOR OR RACE Negro
(11) AGE AT LAST BIRTHDAY 20 (Years)
(12) BIRTHPLACE Clarendon Co
(13) OCCUPATION Laborer
(20) Number of children born to mother, including present birth 6

MOTHER.
(14) NAME BEFORE MARRIAGE Daisy Taylor
(15) PRESENT POSTOFFICE OF MOTHER Sutters
(16) COLOR OR RACE Negro
(17) AGE AT LAST BIRTHDAY 18 (Years)
(18) BIRTHPLACE Clarendon Co
(19) OCCUPATION Farm Laborer
(21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 6 A. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Ellen Magill Midwife.

(24) State whether Physician or Midwife (25) Address of Physician or Midwife Sutters SC

Given name added from a supplemental report
101
Registrar

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

(27) Filed 15 Aug 1916 (28) R. H. ... 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.

MARGIN RESERVED FOR BINDING.
WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
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.
McCaaw, of Columbia.