

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.

RECAP OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

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

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

74911

Registration District No. 4105 Registered No. 108
(For use of Local Registrar)

(2) Full Name of Child Estelle Dargan

If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? girl (4) Twin or Triplet? ESTELLE (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Aug 8 1916
(Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME Jasper Dargan
(9) PRESENT POSTOFFICE OF FATHER Sumter R.F.D. No 3 SC
(10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 24
(Years)
(12) BIRTHPLACE D.C.
(13) OCCUPATION Farmer
(20) Number of children born to mother, including present birth 3

MOTHER. DIXON
(14) NAME BEFORE MARRIAGE Mollie Dixon
(15) PRESENT POSTOFFICE OF MOTHER Sumter S.C. R.F.D. No 3
(16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 23
(Years)
(18) BIRTHPLACE D.C.
(19) OCCUPATION Domestic
(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 born alive at 5 P.M. on the date above stated.
(Born alive or stillborn) (Hour, A. M. or P. M.)

(23) (Signature) Ellen M. Dargan
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Sumter, S.C.

Given name added from a supplemental report
.....
....., 19 ..
Registrar

(26) Witness Martha E. Burkette
(Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed Aug 12 1916 (28) B. M. Laughlin
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 be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.