

No. 1:

## (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

79463

Registration District No. 410 S Registered No. 118  
 (For use of Local Registrar)

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

(3) BOY OR GIRL Boy (4) Twin or Triplet? To be answered only in event of Twins or Triplets (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Aug 25, 1916  
 (Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Henry Jenkins Sr.(9) PRESENT POSTOFFICE OF FATHER Providence S.C.(10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 35  
 (Years)(12) BIRTHPLACE S.C.(13) OCCUPATION Farmer(20) Number of children born to mother, including present birth 2

## MOTHER.

(14) NAME BEFORE MARRIAGE Ella Davis(15) PRESENT POSTOFFICE OF MOTHER Providence S.C.(16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 30  
 (Years)(18) BIRTHPLACE S.C.(19) OCCUPATION Domestic(21) Number of children of this mother now living, including present birth 2

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was Alive at 7-A-M.  
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Sally Grant(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Providence 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 8-26-1916 (28) B. McLaughlin  
 Registrar 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.