

MARGIN RESERVED FOR BINDING.
MAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
TINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the
ST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

(1) PLACE OF BIRTH

County of Sumter
Township of Mayfield
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

87587

Registration District No. 4102 Registered No. 126
(For use of Local Registrar)

City of (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 Harris Lee Jefferson 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 1st (6) Events Married? Yes (7) DATE OF BIRTH Nov 3, 1916
(Name of Month) (Day) (Year)

FATHER
(8) FULL NAME Wm. Jefferson

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

(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 30
(Years)

(12) BIRTHPLACE S.C.

(13) OCCUPATION Farmer

(20) Number of children born to mother, including present birth 5

MOTHER.
(14) NAME BEFORE MARRIAGE Julia Dix

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

(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 26
(Years)

(18) BIRTHPLACE S.C.

(19) OCCUPATION Housewife

(21) Number of children of this mother now living, including present birth 5

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born at 9 P.M.
on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)

(23) (Signature) Better Alexander

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

Given name added from a supplemental report

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

(27) Filed Nov 16, 1916 (28) West Thomas
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.