

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

79476

Registration District No. 4125Registered No. 126
(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 John Henry Butler Jr. (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL? Boy (4) Twin or Triplet? yes (5) Number in order of birth 42 (6) Are Parents Married? yes (7) DATE OF BIRTH Sept 4, 1916
 (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME John Henry Butler Sr.
 (9) PRESENT POSTOFFICE OF FATHER Sumter S.C. R.F.D.
 (10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 42 (Years)
 (12) BIRTHPLACE S.C.
 (13) OCCUPATION Farmer
 (20) Number of children born to mother, including present birth 5

MOTHER.
 (14) NAME BEFORE MARRIAGE Katie Harris
 (15) PRESENT POSTOFFICE OF MOTHER Sumter S.C. R.F.D.
 (16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 28 (Years)
 (18) BIRTHPLACE S.C.
 (19) OCCUPATION Domestic
 (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 Alive at P.M.
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

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

Given name added from a supplemental report

(26) Witness Mrs. Eva Bunkette
 (Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed 9-18-16 (28) B. McLaughlin
 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.