

(1) PLACE OF BIRTH

County of AlconTownship of James & Wood

Inc. Town of

City of

(If birth occurs in a hospital or other institution, give name of same instead of street and number)

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No. For State Registrar Only

77027

Registration District No. 20.56 Registered No. 27

(For use of Local Registrar)

St. (Ward)

(2) Full Name of Child

Ketty Sumter

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? yes

(7) DATE OF BIRTH

(Name of Month) (Day) (Year)

Aug 31 1916

(8) FULL NAME

George Sumter Jr.

(14) NAME BEFORE MARRIAGE

Joe Carter

(9) PRESENT POSTOFFICE OF FATHER

Immocsville S.C.

(15) PRESENT POSTOFFICE OF MOTHER

Immocsville S.C.

(10) COLOR OR RACE

black

(11) AGE AT LAST BIRTHDAY

(Years)

51

(16) COLOR OR RACE

black

(17) AGE AT LAST BIRTHDAY

(Years)

42

(12) BIRTHPLACE

Cartersville, S.C.

(18) BIRTHPLACE

Cartersville, S.C.

(13) OCCUPATION

forming10

(19) OCCUPATION

house keeper

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

10

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

9

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child who was alive, at 11 (Hour A. M. or P. M.) on the date above stated.

(23) (Signature)

Conner R. L.

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

MidwifeCartersville, S.C.

Given name added from a supplemental report

(26) Witness

J. P. Humphrey

(27) Filed

1916

(28) Local Registrar

J. P. HumphreyJ. P. HumphreyJ. P. Humphrey

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.

RECEIVED OF COLUMBIA