

(1) PLACE OF BIRTH

County of EdgewoodTownship of Edgewood

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

No. 28152

28152

Registration District No. 184.2 Registered No. 26
(For use of Local Registrar)(2) Full Name of Child Hartha Mithis

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

(3) SEX OR CHILD girl (4) Type or Trade no (5) Number in order of birth no (6) Age no (7) Date of birth Sept 12 1923
(For use of Local Registrar)

FATHER.

(8) Full Name Theodore Mithis(9) Present Residence of Father Edgewood S.C.(10) Color negro (11) Age at last birthday 20(12) Birthplace Edgewood S.C.(13) Occupation Lawmilling(14) Number of children born to mother, including present birth one

MOTHER.

(15) Full Name Ethel May Tillman(16) Present Residence of Mother Edgewood S.C.(17) Color negro (18) Age at last birthday 23(19) Birthplace Edgewood S.C.(20) Occupation Farmer hand(21) Number of children of this mother now living, including present birth one

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 10 P.M. on the date above stated.
(For use of stillborn) (For A. M. or P. M.)(23) (Signature) Ethel May Tillman(24) State whether Physician or Midwife Midwife(25) Address of Physician or Midwife Edgewood S.C.

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 22 is signed by mother)

(27) Date Sept 12 1923 (28) Registrar Edgewood S.C.

*When there was no attending physician or midwife, then the father, householder, etc., should make this report. If a child breathes even once, it must not be reported as stillborn. No report is desired of children before the fifth month of pregnancy.