

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 8

## (1) PLACE OF BIRTH

County of BerkleyTownship of St. Stephens

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

6062

Registration District No. 706Registered No. 19

(For use of Local Registrar)

## (2) Full Name of Child

Anna Boyd Mitchum

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

(3) BOY OR GIRL

Boy

(4) Twin or Triplet

Single

(5) Number in order of birth

one

(6) Are Parents Married

yes

(7) DATE OF BIRTH

Feb. 23, 23

(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME

Willie Mitchum

(9) PRESENT POSTOFFICE OF FATHER

Bethera

(10) COLOR OR RACE

white

(11) AGE AT LAST BIRTHDAY

34

(Year)

(12) BIRTHPLACE

Bethera

(13) OCCUPATION

Farmer

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

5-five

## MOTHER.

(15) NAME BEFORE MARRIAGE

Mary Shaw

(16) PRESENT POSTOFFICE OF MOTHER

Bethera

(17) COLOR OR RACE

white

(18) AGE AT LAST BIRTHDAY

32

(Year)

(19) BIRTHPLACE

Bethera

(20) OCCUPATION

House work

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

5-five

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(22) I hereby certify that I attended the birth of this child, who was alive at 2.23 M., on the date above stated. (Born alive or stillborn) (Hour) (A. M. or P. M.)

(23) (Signature)

Mary G. Gaston

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Midwife Bethera

Given name added from a supplemental report

(26) Witness

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

(27) Filed

Mar. 25, 23

(28)

J. J. Gaston

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.