

FORM NO. 10. MAILING RESERVED FOR BUNTING. MAILING PLAINLY, WITH ENVELOPING 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.

(1) PLACE OF BIRTH

County of Sumter

Township of Kahtoy Creek

or
Inc. Town of
or

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
50599

Registration District No. 4106 Registered No. 14

(For use of Local Registrar)

(2) Full Name of Child Mary Alice Lee { If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Girl (4) Twin or Triplet? No (5) Number in order of birth 8 (6) Are Parents Married? No (7) DATE OF BIRTH Feb. 22 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Algie Lee

(9) PRESENT POSTOFFICE OF FATHER Rumbout SC.

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

(12) BIRTHPLACE Sumter Co SC.

(13) OCCUPATION Field Laborer

(20) Number of children born to mother, including present birth { 8

MOTHER.

(14) NAME BEFORE MARRIAGE Phillis Franklin

(15) PRESENT POSTOFFICE OF MOTHER Rumbout SC.

(16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 25 (Years)

(18) BIRTHPLACE Sumter Co SC.

(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 alive at 7 a M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Lewis X. Anderson

(24) State whether Physician or Midwife (25) Address of Physician or Midwife Rumbout SC.

Given name added from a supplemental report

....., 191.....

Registrar

(26) Witness W. C. Hadden
(Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed Feb 29 1916 (28) W. C. Hadden 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.

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(Copy from original in file)