

FORM NO. 7. 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.  
 McCaw, of Columbia.

(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. 44895 For State Registrar Only

Registration District No. 41.05 Registered No. 117  
 (For use of Local Registrar)

(2) Full Name of Child Mary Ahee Mitchell { 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 Dec. 1st 1924  
To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

**FATHER.**  
 (8) FULL NAME William Mitchell  
 (9) PRESENT POSTOFFICE OF FATHER Dalzell S.C. Co.  
 (10) COLOR OR RACE Cul (11) AGE AT LAST BIRTHDAY 21  
 (12) BIRTHPLACE S.C.  
 (13) OCCUPATION Farmer  
 (20) Number of children born to mother, including present birth 1

**MOTHER.**  
 (14) NAME BEFORE MARRIAGE Minnie Holiday  
 (15) PRESENT POSTOFFICE OF MOTHER Dalzell S.C. Co.  
 (16) COLOR OR RACE Cul (17) AGE AT LAST BIRTHDAY 18  
 (18) BIRTHPLACE S.C.  
 (19) OCCUPATION Housewife  
 (21) Number of children of this mother now living, including present birth 1

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\***

(22) I hereby certify that I attended the birth of this child, who was alive at 10 a. M., on the date above stated. (Born, alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) William Mitchell  
 (24) State whether Physician or Midwife Father (25) Address of Physician or Midwife Dalzell S.C.

Given name added from a supplemental report ..... 191.....  
 Registrar

(26) Witness Mrs. Eva Burkette  
 (Signature of Witness necessary only when question 23 is signed by mark)  
 (27) Filed Dec 10 1924 (28) J. J. Raffield  
 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.