

(1) PLACE OF BIRTH

County of Sumter
 Township of Sumter
 or
 Inc. Town of _____
 or
 City of _____

CERTIFICATE OF BIRTH STATE OF SOUTH CAROLINA Bureau of Vital Statistics State Board of Health

File No.—For State Registrar Only

79509

Registration District No. 4108Registered No. 138
(For use of Local Registrar)

(No. _____ St. _____ Ward _____)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number)

(2) Full Name of Child Elaine Michens

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

(3) BOY OR GIRL

Girl

(4) Twin or triplet

To be answered only in case of Twins or Triplets

(5) Number in order of birth

(6) Sex

Female

(7) DATE OF BIRTH

Aug. 28, 1916
(Name of Month) (Day) (Year)

FATHER

Elaine Michens

MOTHER

(8) FULL NAME

Elaine Michens

(9) NAME BEFORE MARRIAGE

Elaine Michens

(10) PRESENT POSTOFFICE OF FATHER

Sumter

(11) PRESENT RESIDENCE OF MOTHER

Sumter

(12) COLOR OR RACE

Negro

(13) AGE AT LAST BIRTHDAY

26

(14) COLOR OR RACE

Negro

(15) AGE AT LAST BIRTHDAY

26

(16) BIRTHPLACE

Sumter

(17) BIRTHPLACE

Sumter

(18) OCCUPATION

Domestic

(19) OCCUPATION

Domestic

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

3

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

3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born on the date above stated.

(23) Signature of Physician or Midwife

(24) Name of Physician or Midwife

Michens

(25) Address of Physician or Midwife

Sumter

Give name called from a supplement
 of report

(26) Witness

Signature of witness necessary only when question 22 is signed by nurse

(27) Date

Aug. 28, 1916

Signature of Local Registrar

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 stillbirths before the fifth month of pregnancy.