

(1) PLACE OF BIRTH

County of Sumter  
Township of Sumter  
or  
Inc. Town of  
or  
City of (No. St. Ward)

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

File No. - For State Registrar Only  
79522

Registration District No. 4-108 Registered No. 151  
(For use of Local Registrar)

(2) Full Name of Child Walter Jones Jr. If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Boy (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? Yes (7) DATE OF BIRTH Sept. 27, 1916  
(Name of Month) (Day) (Year)

FATHER.  
(8) FULL NAME Walter Jones Sr.  
(9) PRESENT POSTOFFICE OF FATHER Sumter S.C.  
(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY (Years)  
(12) BIRTHPLACE  
(13) OCCUPATION  
(20) Number of children born to mother, including present birth

MOTHER.  
(14) NAME BEFORE MARRIAGE Leona Jones  
(15) PRESENT POSTOFFICE OF MOTHER Sumter S.C.  
(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY (Years)  
(18) BIRTHPLACE  
(19) OCCUPATION  
(21) Number of children of this mother now living, including present birth

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 12 M., on the date above stated. (Born alive or stillborn) (Hour, M. or P. M.)

(23) (Signature) Mrs. Violet Anderson per Registrar  
(24) State whether Midwife Physician or Midwife (25) Address of Physician or Midwife Sumter S.C.

Given name added from a supplemental report  
19  
Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)  
(27) Filed Oct. 1916 (28) W. D. ... 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.

(From data sent in.)

REG. OF COLUMBIA, COLUMBIA, S. C.