

Form No. 1

## (1) PLACE OF BIRTH

County of SumterTownship of Privateer

Inc. Town of .....

City of .....

## CERTIFICATE OF BIRTH

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

File No. — For State Registrar Only

19324

Registration District No. 4104 Registered No. 12  
(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 Jesse Charlie Bartlett If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL

Boy

(4) Twin or Triplet

To be answered only in event of Twin or Triplet

(5) Number in order of birth

(6) Are Parents Married? yes(7) DATE OF BIRTH June 14 1923  
(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME

Joe Bartlett

(9) PRESENT POSTOFFICE OF FATHER

Sumter, S.C. No. 2

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

63  
(Years)

(12) BIRTHPLACE

Sumter Co. S.C.

(13) OCCUPATION

Farming

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

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## MOTHER.

(14) NAME BEFORE MARRIAGE

Belle Johnson.

(15) PRESENT POSTOFFICE OF MOTHER

Sumter, S.C. No. 2

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

43  
(Years)

(18) BIRTHPLACE

Sumter, Co. S.C.

(19) OCCUPATION

House and Field Work.

(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 Alive at 5 AM.  
(Born alive or stillborn) (Hour A. M. or P. M.)  
on the date above stated.

(23) (Signature)

(24) State whether Physician or Midwife

Midwife(25) Address of Physician or Midwife  
Sumter, S.C. No. 2

Given name added from a supplemental report

(26) Witness

(Signature of Witness necessary only when question 23 is signed or marked)

6-22-1923

(27) Filed

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(28)

Local Registrar

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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.