

(1) PLACE OF BIRTH

County of ... Sumter

Township of

or

Inc. Town of

or

City of ... Sumter

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child A. B. Cato's child

File No.—For State Registrar Only

20281

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

Registration District No. ... 41ARegistered No. ... 25

(For use of Local Registrar)

(No. St.; Ward)

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

3) BOY OR GIRL?

Girl

(4) Twin or Triplet?

X

(5) Number in order of birth

X

(6) Are Parents Married?

Yes

(7) DATE OF

BIRTH June ... 10 ... 1922

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Acquilla Burrel Cato.

(9) PRESENT POSTOFFICE OF FATHER

St. Charles S. C.

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

38

(Years)

(12) BIRTHPLACE

South Carolina.

(13) OCCUPATION

Mechanic.

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

One

MOTHER.

(14) NAME BEFORE MARRIAGE

Bertha Elizabeth Prescott

(15) PRESENT POSTOFFICE OF MOTHER

St. Charles S. C.

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

16

(Years)

(18) BIRTHPLACE

South Carolina.

(19) OCCUPATION

House wife.

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

One

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Born alive ... at 8 A. ... M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

PhysicianSumter S. C.

Given name added from a supplemental report

(26) Witness

(Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed

June 10 1922

(28)

S. D. Browning

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.

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.

WHITE PLAINLY, WITH LEADING INK—THIS IS A PREVENTIVE MEASURE FOR EACH CHILD, and mark the 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.

MCCAY OF COLUMBIA, COLUMBIA, S. C.

MCC