

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.

McGraw-Hill, Columbia

(1) PLACE OF BIRTH
County of Sumter
Township of Stateburg
or
Inc. Town of
or
City of (No. St.; Ward)
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

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

File No.—For State Registrar Only
44844

Registration District No. 409 Registered No. 110
(For use of Local Registrar)

(2) Full Name of Child Sarah Alston } If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Girl (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Dec. 21, 1915
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Jarvis Alston
(9) PRESENT POSTOFFICE OF FATHER Horatio S. Co.
(10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 28 (Years)
(12) BIRTHPLACE Sumter Co.
(13) OCCUPATION Farmer
(20) Number of children born to mother, including present birth { 3

MOTHER.

(14) NAME BEFORE MARRIAGE Martha Davis
(15) PRESENT POSTOFFICE OF MOTHER Horatio
(16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 25 (Years)
(18) BIRTHPLACE S. Co.
(19) OCCUPATION Domestic laborer
(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 alive at 10 A. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Jarvis Alston (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Horatio S. Co.

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

(26) Witness (Miss) Marion Sanders
(Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed Dec. 22, 1915 (28) Benny Sanders 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 required of stillbirths before the fifth month of pregnancy.