

Form No. 1

(1) PLACE OF BIRTH

County of

Township of

or
Inc. Town ofCity of Sumter S.C.

(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

30283

Registration District No. 41ARegistered No. 91

(For use of Local Registrar)

(No. 9 Purdy St St.; 3 Ward)(2) Full Name of Child Matthew Mission

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

(3) BOY OR GIRL

Boy

(4) Twin or Triplet

No

(5) Number in order of birth

6

(6) Are Parents Married

Yes

(7) DATE OF BIRTH

Apr 23 23

(Month) (Day) (Year)

FATHER.

(8) FULL NAME

Matthew Mission

(9) PRESENT POSTOFFICE OF FATHER

Sumter S.C.

(10) COLOR OR RACE

Colored

(11) AGE AT LAST BIRTHDAY

43

(Year)

(12) BIRTHPLACE

Sumter Co

(13) OCCUPATION

Barber

MOTHER.

(14) NAME BEFORE MARRIAGE

Maggie Porter

(15) PRESENT POSTOFFICE OF MOTHER

Sumter S.C.

(16) COLOR OR RACE

Colored

(17) AGE AT LAST BIRTHDAY

38

(Year)

(18) BIRTHPLACE

Sumter Co

(19) OCCUPATION

Saunders

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

6

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

5

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive or stillborn on the date above stated.(23) (Signature) Rebecca Betts

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

mid. up

Given name of child

(26) Witness

(Signature of Witness necessary only when question 22 is signed by mother)

July 9, 23 (27) P. D. Browning Local Registrar

(28) When the child is born, the father, householder, etc., should make this return. If a child is born, No report is desired of physician.

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
X. 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 3.

Bureau of Statistics, Columbia, S. C.