

Form No. 1

(1) PLACE OF BIRTH

County of Lee
 Township of Stakes Bridge
 or
 Inc. Town of
 or
 City of

CERTIFICATE OF BIRTH

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

File No. - For State Registrar Only

- 39224

Registration District No. 3008 Registered No. 79
 (For use of Local Registrar)

City of (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 Sumter Sullivan Jr 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 Twins or Triplets (5) Number in order of birth (6) Are Parents Married? Yes (7) DATE OF BIRTH Nov. 17, 1922
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Sumter Sullivan(9) PRESENT POSTOFFICE OF FATHER #6 Bishopville SC(10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY 21
 (Years)(12) BIRTHPLACE Aiken Co SC(13) OCCUPATION Well Digging(20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Elberta Simmons(15) PRESENT POSTOFFICE OF MOTHER #6 Bishopville SC(16) COLOR OR RACE Black (17) AGE AT LAST BIRTHDAY 21
 (Years)(18) BIRTHPLACE Aiken Co SC(19) OCCUPATION Domestic(21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Howardine at 9 A. M.,
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Hasty Chanick(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife #7 Bartonsville SC

Given name added from a supplemental report

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

(27) Filed Nov 23 1922 (28) R. M. Smith
 Registrar 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.