

(1) PLACE OF BIRTH

County of Orangeburg.....
 Township of City.....
 or
 Inc. Town of.....
 or
 City of.....

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

22 049278

Registration District No. 36aRegistered No. 1111.....
(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 Anna Bernice Bryant

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

(3) BOY OR GIRL? Girl(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. 11....., 1927
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Alonzo Webster Bryant

(9) PRESENT POSTOFFICE OF FATHER

Orly, SC

(10) COLOR OR RACE

Negro

(11) AGE AT LAST BIRTHDAY

27
(Years)

(12) BIRTHPLACE

Barnwell Co. SC

(13) OCCUPATION

Teacher

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

One

MOTHER.

(14) NAME BEFORE MARRIAGE

A. Gertrude Dangerfield

(15) PRESENT POSTOFFICE OF MOTHER

Orly

(16) COLOR OR RACE

Negro

(17) AGE AT LAST BIRTHDAY

27
(Years)

(18) BIRTHPLACE

Kingslee Co. SC

(19) OCCUPATION

Housewife

(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 Alive..... at 6:30..... M.,
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

L. C. Sheant

(24) State whether Physician or Midwife

Midwife

(25) Address of Physician or Midwife

Orly, SC

Given name added from a supplemental report

(26) Witness

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

(27) Filed

May 20 1926

(28)

W. B. Decker

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.