

CERTIFICATE OF BIRTH

File No.—For State Registrar Only

71178

(1) PLACE OF BIRTH

County of Anderson

Township of Varennus

or
Inc. Town of out City

or
City of Anderson

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

Registration District No. 3A

Registered No. 298
(For use of Local Registrar)

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

(3) BOY OR GIRL? (4) Twin or Triplet? (5) Number in order of birth 4 (6) Are Parents Married? Yes (7) DATE OF BIRTH Aug. 3, 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Ward B. Pruitt

(9) PRESENT POSTOFFICE OF FATHER Anderson S.C.

(10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY 38 (Years)

(12) BIRTHPLACE S. C. Due West Abbeville Co.

(13) OCCUPATION Painter

(20) Number of children born to mother, including present birth 4

MOTHER.

(14) NAME BEFORE MARRIAGE Elyza J. Turner

(15) PRESENT POSTOFFICE OF MOTHER Anderson S.C.

(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 31 (Years)

(18) BIRTHPLACE Greenville S.C.

(19) OCCUPATION House Wife

(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 Born at 1030 P.M. (Born alive or stillborn) (Hour A. M. or P. M.)
on the date above stated.

(23) (Signature) Dr. M. A. Anderson
(24) State whether Physician or Midwife M. D. (25) Address of Physician or Midwife Anderson S.C.

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

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
(27) Filled 191.... (28) L. B. Ruyter 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.

*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.

SOUTH CAROLINA BUREAU OF VITAL STATISTICS
 COUNTY OF ANDERSON
 TOWNSHIP OF VARENNUS
 CITY OF ANDERSON
 REGISTRATION DISTRICT NO. 3A
 REGISTERED NO. 298
 FILE NO. 71178
 BIRTH OF BESSIE PRUITT
 AUGUST 3, 1916
 FATHER: WARD B. PRUITT
 MOTHER: ELYZA J. TURNER
 COLOR: BLACK
 RACE: NEGRO
 BIRTHPLACE: S. C. DUE WEST ABBEVILLE CO.
 OCCUPATION: PAINTER
 NUMBER OF CHILDREN BORN TO MOTHER: 4
 NUMBER OF CHILDREN OF THIS MOTHER NOW LIVING: 1
 ATTENDING PHYSICIAN: DR. M. A. ANDERSON
 LOCAL REGISTRAR: L. B. RUYTER