

(1) PLACE OF BIRTH

County of EdgfieldTownship of Whipweaveror
Inc. Town of North Augustaor
City of R.D. #1

(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

52029

Registration District No. Registered No.

(For use of Local Registrar)

St.; Ward)

(2) Full Name of Child Idell Bennett

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

(3) BOY OR GIRL?

(4) Twin or Triplet? Yes(5) Number in order of birth 3rd(6) Are Parents Married? Yes(7) DATE OF BIRTH Feb. 3

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Herb Bennett(9) PRESENT POSTOFFICE OF FATHER Vienna Ga.(10) COLOR OR RACE White(11) AGE AT LAST BIRTHDAY 28 (Years)(12) BIRTHPLACE Dick, Ga.(13) OCCUPATION Farm Hand(20) Number of children born to mother, including present birth 4

MOTHER.

(14) NAME BEFORE MARRIAGE Fannie Bell Jones(15) PRESENT POSTOFFICE OF MOTHER North Augusta(16) COLOR OR RACE White(17) AGE AT LAST BIRTHDAY 21 (Years)(18) BIRTHPLACE Ellis, Ga.(19) OCCUPATION Farm Help(21) Number of children of this mother now living, including present birth 9

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 8:30 A.M. on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)(23) (Signature) Dr. G. Briggs M.D.

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

....., 191....

Registrar

(26) Witness

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

(27) Filed Mar. 7 191....(28) Mrs. W. C. Tamm

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.

Registrar I

LOCAL REGISTRAR.

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