

(1) PLACE OF BIRTH

County of Berkeley
 Township of St. Michaels
 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

6653

Registration District No. 70.7 Registered No. 12
 (For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Albert Bennett 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 1 (6) Age Parents Married? yes (7) DATE OF BIRTH Mar 29 22
 (Name of Month) (Day) (Year)

FATHER		MOTHER	
(8) FULL NAME <u>Robert Bennett</u>	(14) NAME BEFORE MARRIAGE <u>Carolina Jenkins</u>	(15) PRESENT POSTOFFICE OF FATHER <u>Wando SC</u>	(16) COLOR OR RACE <u>Col</u>
(9) PRESENT POSTOFFICE OF FATHER <u>Wando SC</u>	(17) AGE AT LAST BIRTHDAY <u>25</u>	(10) COLOR OR RACE <u>Col</u>	(18) BIRTHPLACE <u>Berkeley</u>
(11) AGE AT LAST BIRTHDAY <u>26</u>	(19) OCCUPATION <u>Housewife</u>	(12) BIRTHPLACE <u>Berkeley</u>	(20) Number of children of this mother now living, including present birth <u>Six</u>
(13) OCCUPATION <u>Laborer</u>			

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 5 P.
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Grace Bennett (24) State whether Physician or Midwife Midwife (25) Address of Physic. or Midwife Wando

Given name added from a supplemental report: _____

(26) Witness (Signature of Witness necessary only when question 22 is signed by mark) W. E. Cook

(27) Filed Apr 5 1922 (28) W. E. Cook 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 be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.