

Caw, of Columbia.

(1) PLACE OF BIRTH

County of Cherokee

Township of

Inc. OF Town of Cheraw

City of

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

(2) Full Name of Child Hattie Bennett

File No. — For State Registrar Only

76306

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

Registration District No. 12A Registered No.

(For use of Local Registrar)

(3) BOY OR GIRL? *Girl*

(4) Twin or triplet?

(5) Number in order of birth

(6) Are Parents Married? *Yes*

(7) DATE OF BIRTH Sept. 30, 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Walter Bennett

(9) PRESENT POSTOFFICE OF FATHER *Cheraw, S.C.*

(10) COLOR OR RACE Cal (11) AGE AT LAST BIRTHDAY 30 (Years)

(12) BIRTHPLACE

(13) OCCUPATION

(20) Number of children born to mother, including present birth 7

MONSTER

(14) NAME BEFORE MARRIAGE *Johnnie Mae*

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

(16) COLOR OR RACE Cal (17) AGE AT LAST BIRTHDAY 30 (Years)

(18) BIRTHPLACE

(19) OCCUPATION	
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(21) Number of children of this mother
now living, including present birth { 6

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE:

(22) I hereby certify that I attended the birth of this child, who was Born alive at 1 A M.
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) *A. J. Lla... F. ...*

(24) State whether Physician or Midwife ☒ Physician ☐ Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

(26) Witness L. E. Warrick, Jr.
(Signature of Witness necessary only
when question 23 is signed by mark)

(27) Filed Oct 2 1916 (28) 160 Main Street
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.