

MARGIN RESERVED FOR BINDING.
WHITE PLAINLY, WITH ENLARGED INITIALS IS A PERMANENT RECORD.
N.B.—In case of TWINS OR TRIPLETS use a SEPARATE PLANK FOR EACH CHILD, and mark the
FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 8.

(1) PLACE OF BIRTH

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

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

File No.—For State Registrar Only

71348

Registration District No 4A

Registered No. 30
(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 Mina Pauline

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

(3) BOY ☒ GIRL ☒
(4) Twin or Triplet? ☐ (5) Number in order of birth 1st
To be answered only in event of Twins or Triplets

(6) Are Parents Married? yes

(7) DATE OF BIRTH June 30 1916
(Month) (Day) (Year)

(8) FULL NAME Wm. R. Sanders

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

(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 33

(12) BIRTHPLACE Bamwell S.C.

(13) OCCUPATION Farmer

(20) Number of children born to mother, including present birth 0

(14) NAME BEFORE MARRIAGE Mrs. Elizabeth Pora Ely Bryant

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

(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 34

(18) BIRTHPLACE Darlington S.C.

(19) OCCUPATION Housewife

(21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was ... born alive at 9 P.M. on the date above stated. (Be a live or stillborn) (Hour A. M. or P. M.)

(23) (Signature) [Signature] (24) State whether Physician or Midwife Midwife

(25) Address of Physician or Midwife Bamberg S.C.

(26) Witness (Signature of Witness necessary only when question 23 is signed by male) [Signature]

(27) Filed Aug. 31 1916 (28) John Cassin Local Registrar

When there was no attending physician or midwife, then the father, householder, or ... 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.