

(1) PLACE OF BIRTH

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

53854

County of CharlottesvilleTownship of Woodruffor  
Inc. Town ofRegistration District No. 4009 Registered No. 29

(For use of Local Registrar)

City of

(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. Bobbie Mae Rogers

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

(3) BOY OR GIRL? Girl

(4) Twin or Triplet?

(5) Number in order of birth

(6) Are Parents Married? yes(7) DATE OF BIRTH Mar. 3 1916

(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Bellam Columbus Rogers(9) PRESENT POSTOFFICE OF FATHER Switzer, S.C. R.F.D. #1(10) COLOR OR RACE White(11) AGE AT LAST BIRTHDAY 36

(Years)

(12) BIRTHPLACE Charlottesville County(13) OCCUPATION Farmer(14) Number of children born to mother, including present birth Five

## MOTHER.

(14) NAME BEFORE MARRIAGE Josephine Rogers(15) PRESENT POSTOFFICE OF MOTHER Switzer, S.C. R.F.D. #1(16) COLOR OR RACE White(17) AGE AT LAST BIRTHDAY 33

(Years)

(18) BIRTHPLACE Charlottesville County(19) OCCUPATION Housekeeper(20) Number of children of this mother now living, including present birth Five

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was Bobbie Mae ..... G. A. ..... M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) H. A. Workman

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

Physician Woodruff, 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) Filed April 11 1916

(28)

Chas L Bayter  
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.

REGISTERED

LOCAL REGISTRAR

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