

## (1) PLACE OF BIRTH

County of Bamberg  
 Township of Buford Bridge  
 or  
 Inc. Town of Ensign  
 or  
 City of He

## CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

6510

Registration District No. 401 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 Mattie Lee Bennett (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL girl (4) Twin or Triplet? No (5) Number in order of birth 1st (6) Are Parents Married? Yes (7) DATE OF BIRTH Mar 7 1922  
 (Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Lemuel Bennett

(9) PRESENT POSTOFFICE OF FATHER Govan Se

(10) COLOR OR RACE col (11) AGE AT LAST BIRTHDAY 32  
 (Years)

(12) BIRTHPLACE Govan Se

(13) OCCUPATION farmer

(14) Number of children born to mother, including present birth 8

## MOTHER.

(14) NAME BEFORE MARRIAGE Lizzie Minniss

(15) PRESENT POSTOFFICE OF MOTHER Govan Se

(16) COLOR OR RACE col (17) AGE AT LAST BIRTHDAY 28  
 (Years)

(18) BIRTHPLACE SC

(19) OCCUPATION farmer labour

(20) Number of children of this mother now living, including present birth 8

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 3 P. M.  
 on the date above stated. (Born alive or stillborn) (Hour P. M. or P. M.)

(23) (Signature) Lizzie Washington

(24) State whether Physician or Midwife midwife (25) Address of Physician or Midwife Govan Se

Given name added from a supplemental report.

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

(27) Filed 3/17 1922 (28) J. E. Bennett 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.