

(1) PLACE OF BIRTH

County of

Township of

Inc. Town of

or

City of

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

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

48089

Registration District No. 402 Registered No. 13

(For use of Local Registrar)

(2) Full Name of Child

Lillian Bernad Herbert

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? (7) DATE OF BIRTH 7th 16 (8) (Name of Month) (Day) (Year)

FATHER.

(9) FULL NAME Bernard M Herbert

(10) PRESENT POSTOFFICE OF FATHER Embury SC

(11) COLOR OR RACE White (12) AGE AT LAST BIRTHDAY 38 (Years)

(13) BIRTHPLACE Norfolk Va

(14) OCCUPATION Supt. San Mill

(15) Number of children born to mother, including present birth 5

MOTHER.

(16) NAME BEFORE MARRIAGE Ida E Wells

(17) PRESENT POSTOFFICE OF MOTHER Embury SC

(18) COLOR OR RACE White (19) AGE AT LAST BIRTHDAY 31 (Years)

(20) BIRTHPLACE Elm City NC

(21) OCCUPATION Household

(22) Number of children of this mother now living, including present birth 5

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(23) I hereby certify that I attended the birth of this child, who was Born alive at 4 A M. on the date above stated. (Born alive or stillborn) (Hour M. or P. M.)

(24) (Signature)

(25) State whether Physician or Midwife

Branchville SC Physician

Given name added from a supplemental report

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

(27) FILED Feb 28 1916 (28) J. W. Steedly 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.

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FORM NO. 2
MARRIAGE REGISTRATION AND BIRTHING
WITH PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the
FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.