

(1) PLACE OF BIRTH

County of Columbia
Township of Central
or
Inc. Town of Columbia
or
City of

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

File No.—For State Registrar Only
36063

Registration District No. 8200 Registered No. 153
(For use of Local Registrar)

(2) Full Name of Child Elsie Elizabeth Bennett

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

(3) BOY OR GIRL? Girl (4) Twin Single or Triplet? (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH 10, 14, 1902
(Name of Month) (Day) (Year)

(8) FULL NAME OF FATHER C. C. Bennett
(9) PRESENT POSTOFFICE OF FATHER Columbia SC
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 24 (Years)
(12) BIRTHPLACE SC
(13) OCCUPATION Student
(14) Number of children born to mother, including present birth 1

(14) NAME BEFORE MARRIAGE OF MOTHER Lucile Smith
(15) PRESENT POSTOFFICE OF MOTHER Columbia SC
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 18 (Years)
(18) BIRTHPLACE SC
(19) OCCUPATION Wife & Housekeeper
(21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature) [Signature]
(24) State whether Physician or Midwife (25) Address of Physician or Midwife Columbia, SC

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 Oct. 15, 1902 (28) J. H. Bearden
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.
If a child breathes even once, it must not be reported as stillborn before the fifth month of pregnancy.

USE SEPARATE BLANKS for each child, and mark the DIST. JOHN, No. 1, THE OTHER, No. 2, etc., in question 5.

City of Columbia

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