

1  
This is a SEPARATE BLANK FOR EACH CHILD, and mark the  
FIRST-BOUND, No. 1. THE OTHER, No. 2, etc., in question 5.

(1) PLACE OF BIRTH  
County of Abbeville  
Township of Summerville  
or  
Inc. Town of .....  
or  
City of ..... (No. .... St. .... Ward ....)  
(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

17305

Registration District No. .... Registered No. 40 ....  
(For use of Local Registrar)

(2) Full Name of Child Osteal Benton { 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 June 3, 1920  
(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Lawrence Benton

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

(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 37 (Years)

(12) BIRTHPLACE S.C.

(13) OCCUPATION Public Works

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

## MOTHER.

(14) NAME BEFORE MARRIAGE Lulah Sloan

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

(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 37 (Years)

(18) BIRTHPLACE S.C.

(19) OCCUPATION Housewife

(21) Number of children of this mother new 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 ..... at ..... M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Wm. Beach

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

Given name added from a supplemental report

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

(27) Filed July 1, 1920 (28) J. H. Chapman 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.

RECORD OF COLUMBIA, COLUMBIA, S. C.