

(1) PLACE OF BIRTH

County of A. S. Berrien
 Township of Magnolia
 or
 Inc. Town of.....
 or
 City of.....

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

36919

Registration District No..... Registered No. 96
 (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 Bessie Lee Benth 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 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Nov. 14, 22
 To be answered only in event of Twin or Triplet (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Darrel Benth

(9) PRESENT POSTOFFICE OF FATHER Calhoun Falls, S.C.

(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 4.5
 (Year)

(12) BIRTHPLACE A. S. Berrien Co

(13) OCCUPATION Farmer

(20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Hattie Thicker

(15) PRESENT POSTOFFICE OF MOTHER Calhoun Falls, S.C.

(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 28
 (Year)

(18) BIRTHPLACE A. S. Berrien Co

(19) OCCUPATION Domestic

(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 alive at 4 P.M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Sallie Campbell (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 Ark)

(27) Filed Nov. 19, 22 (28) H. C. Vance 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.