

MAINTAIN REMOVED FOR BIDDING.

WHITE 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 3.

RECEIVED BY CLERK, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Sumter...
Township of North...
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

2616

Registration District No. 4107

Registered No. 5...
(For use of Local Registrar)

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

(2) Full Name of Child Jacob Trusdale

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

(3) BOY OR GIRL <u>Boy</u>	(4) Twin <u>1st</u>	(5) Number in order of birth <u>2</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Jan 10, 1911</u> (Month) (Day) (Year)
(8) FULL NAME <u>Eliza Trusdale</u>		(14) NAME BEFORE MARRIAGE <u>Mary Rose</u>		
(9) PRESENT POSTOFFICE OF FATHER <u>Lynchburg, Va.</u>		(15) PRESENT POSTOFFICE OF MOTHER <u>Lynchburg, Va.</u>		
(10) COLOR OR RACE <u>Negro</u>	(11) AGE AT LAST BIRTHDAY <u>22</u> (Years)	(16) COLOR OR RACE <u>Negro</u>		(17) AGE AT LAST BIRTHDAY <u>19</u> (Years)
(12) BIRTHPLACE <u>Sumter, S.C.</u>		(18) BIRTHPLACE <u>Sumter, S.C.</u>		
(13) OCCUPATION <u>Tramming</u>		(19) OCCUPATION <u>Housework</u>		
(20) Number of children born to mother, including present birth <u>6</u>		(21) Number of children of this mother now living, including present birth <u>2</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Colored at 10 P.M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Minix R. Ruffin
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Lynchburg, Va.

Given name added from a supplemental report:

(26) Witness (Signature of Witness necessary only when question 22 is signed "X" mark)

(27) Filed 1-11-11 (28) S. B. McSwain 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.