

(1) PLACE OF BIRTH

County of Union
 Township of Boyanville
 or
 Inc. Town of Buffalo
 or
 City of

CERTIFICATE OF BIRTH

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

File No. - For State Registrar Only

22805

Registration District No. 420Registered No. 823
(For use of Local Registrar)

(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

Robert Gordon Wright

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

(3) BOY OR GIRL boy

(4) Twin or Triplet?

(5) Number in order of birth
To be answered only in event of Twin or Triplet(6) Are Parents Married? ye(7) DATE OF BIRTH July 7, 1923
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Earle R Wright

(9) PRESENT POSTOFFICE OF FATHER

Buffalo SC(10) COLOR OR RACE White(11) AGE AT LAST BIRTHDAY 22
(Years)

(12) BIRTHPLACE

Spartanburg Co.

(13) OCCUPATION

Mill work

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

2

MOTHER.

(15) NAME BEFORE MARRIAGE

Maggie Bell Steffe

(16) PRESENT POSTOFFICE OF MOTHER

Buffalo SC(17) COLOR OR RACE white(18) AGE AT LAST BIRTHDAY 21
(Years)

(19) BIRTHPLACE

Tennessee

(20) OCCUPATION

Domestic

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

2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive on the date above stated.at 7:30 M.,
(Hour) (M. or P. M.)

(23) (Signature)

(24) State whether

Physician or Midwife

(25) Address of Physician or Midwife

Buffalo SC

Given name added from a supplemental report

(26) Witness

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

(27) Filed Aug 10, 1923

(28) Local Registrar

Joe F. Woodward

*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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