

## (1) PLACE OF BIRTH

County of Dorchester  
 Township of Northville  
 or  
 Inc. Town of .....  
 or  
 City of .....

## CERTIFICATE OF BIRTH

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

No. 10.—For State Registrar Only

855

Registration District No. 1602Registered No. 51  
(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 Robert Samuel Ballard

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

(3) BOY OR GIRL	(4) Twin or Triplet? To be answered only in event of Twin or Triplet	(5) Number in order of birth	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH (Name of Month) (Day) (Year) <u>26</u> <u>10</u> <u>23</u>
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## FATHER.

(8) FULL NAME Sam M Ballard  
 (9) PRESENT POSTOFFICE OF FATHER Northville S.C.  
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 38 (Years)  
 (12) BIRTHPLACE Lynchburg Co Va.  
 (13) OCCUPATION Robert M. Baker

## MOTHER.

(14) NAME BEFORE MARRIAGE Mattie K. Brown  
 (15) PRESENT POSTOFFICE OF MOTHER Northville S.C.  
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 36 (Years)  
 (18) BIRTHPLACE Dorchester Co S.C.  
 (19) OCCUPATION House wife

(20) Number of children born to mother, including present birth 9(21) Number of children of this mother now living, including present birth 6

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 1:40 M., on the date above stated. (Born alive or stillborn Hour M. or P. M.)

(23) (Signature) E. Beckham

(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 Feb 5 1923 (28) W. M. C. Leggett 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.

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