

## (1) PLACE OF BIRTH

County of *Kershaw*Township of *Buffalo*

or

Inc. Town of .....

or

City of .....

(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

No. *28920* For this Register OnlyRegistration District No. *1700* Registered No. *85*

(For use of Local Registrar)

## (2) Full Name of Child

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 *1* (6) Are parents married *yes* (7) DATE OF BIRTH *July 27, 1923*

## FATHER.

(8) FULL NAME *Hayes Williams*(9) PRESENT POSTOFFICE OF FATHER *Kershaw S.C. #4*(10) COLOR OR RACE *White* (11) AGE AT LAST BIRTHDAY *42* (Years)(12) BIRTHPLACE *S.C.*(13) OCCUPATION *Farming*(14) Number of children born to mother, including present birth *13*

## MOTHER.

(14) NAME BEFORE MARRIAGE *Maud Williams*(15) PRESENT POSTOFFICE OF MOTHER *Kershaw S.C. #4*(16) COLOR OR RACE *White* (17) AGE AT LAST BIRTHDAY *43* (Years)(18) BIRTHPLACE *S.C.*(19) OCCUPATION *Housewife*(20) Number of children of this mother now living, including present birth *10*

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(21) I hereby certify that I attended the birth of this child, who was *alive* on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.) *3:20 P.*(22) (Signature) *J. R. Balk*(23) State whether Physician or Midwife *Physician* (24) Address of Physician or Midwife *Kershaw S.C.*

Given name added from a supplemental report

(25) Witness (Signature of Witness necessary only when question 21 is signed by mark)

(26) Filed *July 27, 1923* (27) Local Registrar *J. C. Caskill*

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.