

File No. — For State Registrar Only

County of Barren
Township of Spencer
or Town of Whitney

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

19251

Registration District No. 4008 Registered No. 175
(For use of Local Registrar)

(No. St.) Ward
 City of (If person is a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Kathleen Sherbush If child is not yet named, make supplemental report as directed

| | | | | |
|--------------------------------|--|-------------------------------|---|---|
| 3 SEX OR GENDER <i>girl</i> | 4 Twin or Triplet? To be answered only in event of Twin or Triplet | 5 Number in order of birth | 6 Are Parents Married? <i>yes</i> | 7 DATE OF BIRTH <i>June 8 1928</i> (Name of Month) (Day) (Year) |
|--------------------------------|--|-------------------------------|---|---|

FATHER.

1 FULL NAME *Robert Sherbert*
2 PRESENT POSTOFFICE OF FATHER *Whiting SC*
3 COLOR OR RACE *White* (11) AGE AT LAST BIRTHDAY *42*
4 BIRTHPLACE *SC* (Years)

10. PRESENT OCCUPATION Finner

Number of children born to mother including present birth

MOTHER.

(14) NAME BEFORE MARRIAGE *Luila Belcher*

(15) PRESENT POSTOFFICE OF MOTHER *Whitney S C*

(16) COLOR OR RACE *White* (17) AGE AT LAST BIRTHDAY *28* (Years)

(18) BIRTHPLACE *S C*

(10) OCCUPATION
Housewife

(71) Number of children of this mother 5

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE:

22) I hereby certify that I attended the birth of this child, who was white at 11:00 AM on the date above stated. born alive or stillborn Hour 11 M. or P. M.

(20) (Signature) *W. H. Chapman*
(24) State whether *Physician or Midwife* (25) Address *Whitney P. Co.*

Given name added from a supplemental report

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

(27) Filed July 7 1923 (28) M. E. F. Parker
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.