

Form No. 3

## (1) PLACE OF BIRTH

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

**CERTIFICATE OF BIRTH**  
 STATE OF SOUTH CAROLINA  
 Bureau of Vital Statistics  
 State Board of Health

Registration District No. 42BFile No. - For State Registrar Only  
13379Registered No. 36  
(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 LeRoy Kershaw

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

(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH April 29, 1923  
 To be answered only in event of Twin or Triplet (Name of Month) (Day) (Year)

## FATHER

(8) FULL NAME Samuel Kershaw(9) PRESENT POSTOFFICE OF FATHER Buffalo S.C.(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 31 (Year)(12) BIRTHPLACE Union Co.(13) OCCUPATION Farming(14) Number of children born to mother, including present birth Seven

## MOTHER

(15) NAME BEFORE MARRIAGE Lamina Kershaw(16) PRESENT POSTOFFICE OF MOTHER Buffalo S.C.(17) COLOR OR RACE Negro (18) AGE AT LAST BIRTHDAY 29 (Year)(19) BIRTHPLACE Union Co.(20) OCCUPATION Farmer(21) Number of children of this mother now living, including present birth Seven

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Born alive at 5 A.M.  
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Alice Sarter(24) State whether Physician or Midwife Midwife(25) Address of Physician or Midwife Buffalo S.C.

Given name added from a supplemental report

(26) Witness

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

(27) Filed May 10, 1923

(28)

Local Registrar

19  
 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.