

## (1) PLACE OF BIRTH

County of KershawTownship of Buffaloor  
Inc. Town of .....or  
City of .....(No. .... St.; .... Ward)  
(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. for State Registrar Only

28921

Registration District No. 2700 Registered No. 86  
(For use of Local Registrar)

## (2) Full Name of Child

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

(1) BOY OR GIRL girl (4) Twin or Triplet ✓ (6) Number in order of birth ✓ (8) Age at present marriage yes (10) DATE OF BIRTH July 28, 23  
(To be answered only in event of Twin or Triplet) (Date of birth) (Day) (Year)

## FATHER

(9) FULL NAME Everett Truesdale(11) PRESENT POSTOFFICE OF FATHER Kershaw S.C. #4(12) COLOR OR RACE White (13) AGE AT LAST BIRTHDAY 27  
(Year)(14) BIRTHPLACE S.C.(15) OCCUPATION Farming(16) Number of children born to mother, including present birth 2

## MOTHER

(17) NAME BEFORE MARRIAGE Effie Gardner(18) PRESENT POSTOFFICE OF MOTHER Kershaw S.C. #4(19) COLOR OR RACE White (20) AGE AT LAST BIRTHDAY 28  
(Year)(21) BIRTHPLACE S.C.(22) OCCUPATION Housewife(23) Number of children of this mother now living, including present birth 2

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(24) I hereby certify that I attended the birth of this child, who was alive at 10 P. M.,  
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(25) (Signature) J. R. Balk m.d.(26) State whether Physician or Midwife (27) Address of Physician or Midwife Physician Kershaw S.C.

Given name added from a supplemental report

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

Sept 1923 (29) Filed 1923 (30) Local Registrar J. M. McNeill

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.