

(1) PLACE OF BIRTH

County of Florence

Township of

Inc. Town of Florence

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

File No.—For State Registrar Only

52122

Registration District No. 20-A Registered No. 60

(For use of Local Registrar)

1017 St. Chapel Ward(2) Full Name of Child Thaddeus Jordan

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

(3) BOY OR GIRL? <u>Boy</u>	(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>Mar. 15, 1916</u>
Is to be answered only in case of Twins or Triplets				(Name of Month) (Day) (Year)

FATHER.

MOTHER.

(8) FULL NAME Walter Jordan(14) NAME BEFORE MARRIAGE Bessie Cannon(9) PRESENT POSTOFFICE OF FATHER Florence(15) PRESENT POSTOFFICE OF MOTHER Florence(10) COLOR OR RACE colored (11) AGE AT LAST BIRTHDAY 21 (Years)(16) COLOR OR RACE colored (17) AGE AT LAST BIRTHDAY 19 (Years)(12) BIRTHPLACE Florence(18) BIRTHPLACE Florence(13) OCCUPATION working at the florist(19) OCCUPATION house work(20) Number of children born to mother, including present birth 2(21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 4 a.m. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Hannah Cannon(24) State whether Physician or Midwife midwife (25) Address of Physician or Midwife Florence, 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 3/24/16 (28) M. H. J. J. J. 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.