

(1) PLACE OF BIRTH

County of FairfieldTownship of 8

Inc. Town of

City of

If birth occurs in a hospital or other institution, give name of same instead of street and number.

2) Full Name of Child Jalmon Able

File No.—For State Registrar Only

12742

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

Registration District No. 1907 Registered No. 52
(For use of Local Registrar)

St.; Ward)

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

3) SEX OF CHILD <u>Girl</u>	4) Twin or Triplet? <u>No</u>	5) Number in order of birth <u>1</u>	6) Are Parents Married? <u>Yes</u>	7) DATE OF BIRTH <u>December 23, 1916</u> (Name of Month) (Day) (Year)
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FATHER.

8) FULL NAME John Able9) PRESENT POSTOFFICE OF FATHER Nelson S. Gardner10) COLOR Black (11) AGE AT LAST BIRTHDAY 28 (Years)12) BIRTHPLACE Fairfield County13) OCCUPATION Farming14) Number of children born to mother, including present birth 1

MOTHER.

14) NAME BEFORE MARRIAGE Lia Blackman15) PRESENT POSTOFFICE OF MOTHER Nelson S. Gardner16) COLOR Black (17) AGE AT LAST BIRTHDAY 20 (Years)18) BIRTHPLACE Fairfield Carolina19) OCCUPATION House wife20) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(22) I hereby certify that I attended the birth of this child, who was born alive at 12:00 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Fannie Lee(24) State whether Physician or Midwife Midwife(25) Address of Physician or Midwife Ridgeway S.C. 172

Given name added from a supplemental report

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

(27) Date Jan. 15, 1917 (28) F. H. H. H. H. H. 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.

WRITING PLAINLY, WITH "NEADING INK" THIS IS A PRELIMINARY REPORT. IN CASE OF TWINS OR TRIPLETS USE A SEPARATE BLANK FOR EACH CHILD, AND MARK THE FIRST-BORN, No. 1, THE OTHER, No. 2, etc., in question 5.

McNawa of Columbia