(1) PLACE OF BIRTH

County of Allendale

Township of Baldoc

or

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

File No.—For State Registrar Only
37027

Registration District No. 460 2 Registered No. 56
(For use of Local Registrar)

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

(3) BOY OR GIRL? girl (4) Twin or Triplet? (5) Number in order of birth — To be answered only in event of Twins or Triplets (6) Are Parents Married? yes (7) DATE OF BIRTH Nov 17 1922 (Name of Month) (Day) (Year)

FATHER.	MOTHER.
(8) FULL NAME S. J. Jones	(14) NAME BEFORE MARRIAGE Pearl allen
(9) PRESENT POSTOFFICE OF FATHER Appleton SC	(15) PRESENT POSTOFFICE OF MOTHER appleton SC
(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 29 (Years)	(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 27 (Years)
(12) BIRTHPLACE SC	(18) BIRTHPLACE SC
(13) OCCUPATION Farmer	(19) OCCUPATION Housework
(20) Number of children born to mother, including present birth 7	(21) Number of children of this mother now living, including present birth 6

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive (Born alive or stillborn) at 5a M. (Hour A. M. or P. M.) on the date above stated.

(23) (Signature) Dora McCare

(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Mark Appleton SC

Given name added from a supplemental report

(26) Witness F. H. Boyd (Signature of Witness necessary only when question 22 is signed by mark)

..... 19 .....
Registrar

(27) Filed Nov 27 1922 (28) F. H. Boyd M.D.
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.

*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.

McCaw of Columbia, Columbia, S. C.