

(1) PLACE OF BIRTH

County of

Township of

or

Inc. Town of

or

City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

28839

Registration District No. 310

Registered No. 99
(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 Comdia Francis Gibson is not yet named, make supplemental report as directed

3) BOY OR GIRL

G-

4) Twin or Triplet?

To be answered only in event of Twins or Triplets

(5) Number in order of birth

(6) Are

Marr

(7) DATE OF

BIRTH

9 25 22
(Name of Month) (Day) (Year)

FATHER.

5) FULL NAME

Clifton Gibson

9) PRESENT POSTOFFICE OF FATHER

Pudleton, S.C.

(10) COLOR OR RACE

W-

(11) AGE AT LAST BIRTHDAY

20
(Years)

(12) BIRTHPLACE

Aud Co., S.C.

(13) OCCUPATION

Farming

MOTHER.

(14) NAME BEFORE MARRIAGE

Claudie Jordan

(15) PRESENT POSTOFFICE OF MOTHER

Pudleton, S.C.

(16) COLOR OR RACE

W-

(17) AGE AT LAST BIRTHDAY

20
(Years)

(18) BIRTHPLACE

Jocosa, Ga.

(19) OCCUPATION

Housewife

(21) Number of children of this mother now living, including present birth

1

(20) Number of children born to mother, including present birth

1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) 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.)

(23) (Signature)

C. C. Jordan

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Pudleton 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

Oct 13 1922

(28)

H. H. Seawright

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.

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