

MARGIN RESERVED FOR BINDING.  
WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.  
N. B.—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.  
McGRAW OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Presump  
Township of Liberty  
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  
**16389**

Registration District No. 3706 Registered No. 63  
(For use of Local Registrar)

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

(2) Full Name of Child John Bates Gilespie If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL boy (4) Twin or Triplet? ✓ (5) Number in order of birth ..... (6) Are Parents Married? yes (7) DATE OF BIRTH 5-31-27  
(Name of Month) (Day) (Year)

**FATHER.**

(8) FULL NAME Henry Francis Gilespie  
(9) PRESENT POSTOFFICE OF FATHER Liberty S.C. 4  
(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 31  
(Year) .....  
(12) BIRTHPLACE Presump Co S.C.  
(13) OCCUPATION Farmer  
(20) Number of children born to mother, including present birth 13

**MOTHER.**

(14) NAME BEFORE MARRIAGE Grace Bates  
(15) PRESENT POSTOFFICE OF MOTHER Liberty S.C. 4  
(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 26  
(Year) .....  
(18) BIRTHPLACE Presump Co S.C.  
(19) OCCUPATION housewife  
(21) Number of children of this mother now living, including present birth 13

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\***

(22) I hereby certify that I attended the birth of this child, who was alive at 7 P. M.,  
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) W. J. [Signature]

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

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

(27) Filed June 7 1927 (28) John T. Bogg 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.

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