

(1) PLACE OF BIRTH

County of Lee
Township of Bishopville
or
Inc. Town of

CERTIFICATE OF BIRTH
STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of Health

Registration District No. 3000 Registered No. 42
(For use of Local Registrar)

City of (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 Jude Gilbert If child is not yet named, make supplemental report as directed

| | | | |
|--|--|-------------------------------------|-------------------------------|
| (3) DATE OF BIRTH <u>Oct 27 1922</u> (Name of Month) (Day) (Year) | (4) TWO or THREE To be answered only in event of Twins or Triplets | (5) NUMBER IN ORDER OF BIRTH | (6) SEX <u>Male</u> |
|--|--|-------------------------------------|-------------------------------|

| FATHER. | | MOTHER. | |
|--|---|--|---|
| (8) NAME BEFORE MARRIAGE <u>Tom G. Gilbert</u> | (10) NAME BEFORE MARRIAGE <u>Bessie Beulah</u> | (9) PARENT RESIDENCE OF FATHER <u>Bishopville S.C.</u> | (11) PARENT RESIDENCE OF MOTHER <u>Bishopville S.C.</u> |
| (12) COLOR OR RACE <u>White</u> | (14) COLOR OR RACE <u>White</u> | (13) AGE AT LAST BIRTHDAY <u>21</u> (Years) | (15) AGE AT LAST BIRTHDAY <u>22</u> (Years) |
| (16) BIRTHPLACE <u>Lee Co</u> | (18) BIRTHPLACE <u>Lee Co</u> | (17) OCCUPATION <u>Farmer</u> | (19) OCCUPATION <u>Servant</u> |
| (20) Number of children born to mother, including present birth <u>2</u> | (21) Number of children of this mother now living, including present birth <u>2</u> | | |

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature) Conrad J. ...
(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Bishopville S.C.

Given name added from a supplemental report

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

(27) Filed N.Y.N. 23 (28) Thos. H. Jones
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.