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.

McCAIN OF COLUMBIA, COLUMBIA, S. C.

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only: 4159

(1) PLACE OF BIRTH

County of Greenwood

Township of Walnut Grove

or

Inc. Town of .....

or

City of Ware Shoals S.C. (No. ..... St.; ..... Ward)

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

Registration District No. 2314 Registered No. 14 (For use of Local Registrar)

(2) Full Name of Child Henry Gambrell — If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Boy

(4) Twin or Triplet? — To be answered only in event of Twins or Triplets

(5) Number in order of birth

(6) Are Parents Married? Yes

(7) DATE OF BIRTH Feb 17 1923 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME M. R. Gambrell

(9) PRESENT POSTOFFICE OF FATHER Ware Shoals

(10) COLOR OR RACE W

(11) AGE AT LAST BIRTHDAY 30 (Years)

(12) BIRTHPLACE Anderson Co

(13) OCCUPATION Cotton mill

(20) Number of children born to mother, including present birth 3

MOTHER.

(14) NAME BEFORE MARRIAGE Ethel Merritt

(15) PRESENT POSTOFFICE OF MOTHER Ware Shoals

(16) COLOR OR RACE W

(17) AGE AT LAST BIRTHDAY 25 (Years)

(18) BIRTHPLACE Anderson Co

(19) OCCUPATION Housewife

(21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive (Born alive or stillborn) at 1:30 A.M. (Hour A. M. or P. M.) on the date above stated.

(23) (Signature) J. W. Workman

(24) State whether Physician or Midwife Physician

(25) Address of Physician or Midwife Ware Shoals S.C.

Given name added from a supplemental report

..... 19 ....
Registrar

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

(27) Filed Mar 19 .... (28) O. L. Bartle 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.