

MARGIN RESERVED FOR INDEXING.  
 WHEN PLAINLY VISIBLE UNPAPERED INK—THEN IN A COMPLAINING BIRTH.  
 IN CASE OF CHILDREN USE A SEPARATE BLANK FOR EACH CHILD, AND MARK THE  
 FIFTEENTH, NO. 1. THIS OFFICE, NO. 2, etc., in question 5.  
 REGISTRATION DISTRICT, CALDWELL, D. O.

(1) PLACE OF BIRTH

County of Spartanburg  
 Township of Beach Springs  
 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  
**2463**

Registration District No. 40-6 Registered No. 4  
 (For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)  
 (No. .... St.; ..... Ward)

(2) Full Name of Child Gladys Josephine Clemens

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 — 6) Are Parents Married? Yes 7) DATE OF BIRTH Jan. 15, 1917  
 To be answered only in event of Twin or Triplets (Name of Month) (Day) (Year)

FATHER.

8) FULL NAME Harley Y. Clemens  
 9) PRESENT POSTOFFICE OF FATHER Inman, S.C.  
 10) COLOR OR RACE White 11) AGE AT LAST BIRTHDAY 39 (Years)  
 12) BIRTHPLACE N.C.  
 13) OCCUPATION Mill Worker

MOTHER.

14) NAME BEFORE MARRIAGE Cora Ballew  
 15) PRESENT POSTOFFICE OF MOTHER Inman, S.C.  
 16) COLOR OR RACE White 17) AGE AT LAST BIRTHDAY 27 (Years)  
 18) BIRTHPLACE S.C.  
 19) OCCUPATION Housework

20) Number of children born to mother, including present birth 4 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 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) W. E. Lewis M.D.  
 (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Inman, 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 Jan 16, 1917 (28) E. B. Lopez 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.