

MEASUREMENTS AND SEX RECORDS FOR EACH CHILD, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc. In question 5.

(1) PLACE OF BIRTH

County of Albany
Township of Langley
or
Inc. Town of
or
City of Bath St.

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

File No.—For State Registrar Only
24542

Registration District No. 2-1-7-a Registered No. 6-7
(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 John A. Gordon (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth (6) Are Parents Married? Yes (7) DATE OF BIRTH June 17, 22
(Name of Month) (Day) (Year)

FATHER.
8) FULL NAME Frank S. Gordon
9) PRESENT POSTOFFICE OF FATHER Bath St.
10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 31
(Years)
12) BIRTHPLACE Miss
13) OCCUPATION Mill Opr
20) Number of children born to mother, including present birth 2

MOTHER.
14) NAME BEFORE MARRIAGE Annette A. Hines
15) PRESENT POSTOFFICE OF MOTHER Bath St.
16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 24
(Years)
18) BIRTHPLACE Alabama
19) OCCUPATION Domestic
21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was A. L. L. at 10:30 A.M.,
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) John S. Bradley
(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Bath St.

Given name added from a supplemental report
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..... 19

(26) Witness
(Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed June 29, 1922 (28) L. W. Bradley 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.