

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 3.

McCammer Columbia, Columbia, S. C.

(1) PLACE OF BIRTH
 County of Cherokee
 Township of Hammond
 or
 Inc. Town of
 or
 City of
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

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

Registration District No. 104 Registered No. 19
 (For use of Local Registrar)

(No. St.; Ward)

File No.—For State Registrar Only
12540

(2) Full Name of Child Norman Gordon If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL <u>Boy</u>	(4) Twin or Triplet? To be answered only in case of Twins or Triplets	(5) Number in order of birth	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>May 3 1923</u> (Month) (Day) (Year)
FATHER			MOTHER	
(8) FULL NAME <u>Chas. Gordon</u>			(14) NAME BEFORE MARRIAGE <u>Beth Jacob</u>	
(9) PRESENT POSTOFFICE OF FATHER <u>Ashtsville S.C.</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Ashtsville S.C.</u>	
(10) COLOR OR RACE <u>Caucasian</u>			(16) COLOR OR RACE <u>Caucasian</u>	
(11) AGE AT LAST BIRTHDAY <u>28</u> (Years)			(17) AGE AT LAST BIRTHDAY <u>28</u> (Years)	
(12) BIRTHPLACE <u>Ashtsville Co</u>			(18) BIRTHPLACE <u>Ashtsville Co</u>	
(13) OCCUPATION <u>Farming</u>			(19) OCCUPATION <u>Teacher</u>	
(20) Number of children born to mother, including present birth <u>7</u>			(21) Number of children of this mother now living, including present birth <u>6</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Born alive or stillborn at 9:00 A.M. on the date above stated. (Hour A.M. or P.M.)

(23) (Signature) Emma R. Baker
 (24) State whether Physician or Midwife
 (25) Address of Physician or Midwife
Midway Ashtsville S.C.

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

(27) Filed 5/7 1923 (28) J. M. Pether Local Registrar

Given name added from a supplemental report

19 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.