

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 4

Revised by Columbia, Columbia, S. C.

(1) PLACE OF BIRTH

County of Saluda  
 Township of Bethesda  
 Inc. Town of.....  
 City of.....

CERTIFICATE OF BIRTH

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

File No. — For State Registrar Only  
26137

Registration District No. 3502 Registered No. 52  
 (For use of Local Registrar)

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

(2) Full Name of Child John Laura Gibson If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL (4) Twin or Triplet (5) Number in order of birth (6) Sex (7) DATE OF BIRTH

FATHER. (8) FULL NAME Ben Gibson age 71 (14) NAME BEFORE MARRIAGE Gibson Mather  
 (9) PRESENT POSTOFFICE OF FATHER Lexville S.C. (15) PRESENT POSTOFFICE OF MOTHER Lexville S.C.  
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 74 (16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY  
 (12) BIRTHPLACE Saluda (18) BIRTHPLACE Saluda  
 (13) OCCUPATION Farming (19) OCCUPATION Farming  
 (20) Number of children born to mother, including present birth 3 (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 at Lexville S.C. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Abbie Nelson (24) State whether Physician or Midwife (25) Address of Physician or Midwife Lexville S.C.

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 22 is signed by mark)

(27) Filed Aug 15 1922 (28) J. C. Calhoun 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.