

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. McCaw, of Columbia.

(1) PLACE OF BIRTH

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

County of

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

76058

Township of

Inc. Town of or Registration District No. 9A Registered No. 1035

City of Charleston (No. 8 Thompson Coat. 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 .. Engene Gladson { If child is not yet named, make supplemental report as directed.

(3) BOY OR GIRL? <u>Boy</u>	(4) Twin or Triplet? <u>X</u> <small>To be answered only in event of Twins or Triplets</small>	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>Sep. 29, 1916</u> <small>(Name of Month) (Day) (Year)</small>
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FATHER.

(8) FULL NAME Samuel Gladson

(9) PRESENT POSTOFFICE OF FATHER Edisto S. C.

(10) COLOR OR RACE colored (11) AGE AT LAST BIRTHDAY 21 (Years)

(12) BIRTHPLACE Edisto S. C.

(13) OCCUPATION Driver

(20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Lizzie Clark

(15) PRESENT POSTOFFICE OF MOTHER Edisto

(16) COLOR OR RACE colored (17) AGE AT LAST BIRTHDAY 18 (Years)

(18) BIRTHPLACE Edisto S. C.

(19) OCCUPATION Housework

(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 born alive at 1 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Julia E. Smith 34 Washington

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report 191.....
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Registrar

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

(27) Filed 10/7/16 (28) J. Mercus Green, M.D.
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.