

## (1) PEACE OF BIRTH

# CERTIFICATE OF BIRTH

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

No. 3114 for State Register Only

County of Charleston

Township of .....

Inc. Town of .....

Registration District No. 9ARegistered No. 1730

(For use of Local Registrar)

City of Charleston (No. 1730 Hosp. St. 1730 Ward) (If birth occurs in a hospital or other institution, give name of same instead of street and number.)(2) Full Name of Child Shirley Gordon If child is not yet named, make supplemental report as directed

(3) girl (4) Twins (5) Number in order of 1 (6) Are Parents Married Yes (7) DATE OF BIRTH Feb. 2nd, 1923 (Month of Birth) (Day) (Year)

FATHER: (7) FULL NAME Stephen F. Shickelgren (14) NAME BEFORE MARRIAGE Carle Sloan Shickelgren (8) PRESENT POSTOFFICE OF FATHER 12 Lowndes St. (15) PRESENT POSTOFFICE OF MOTHER 12 Lowndes St. (10) COLOR OR RACE W (11) AGE AT LAST BIRTHDAY 27 (Years) (16) COLOR OR RACE W (17) AGE AT LAST BIRTHDAY 27 (Years) (12) BIRTHPLACE Charleston, S.C. (13) BIRTHPLACE Charleston, S.C. (14) OCCUPATION Shickel & Borden, Inc. (15) OCCUPATION Wife (16) Number of children born to mother, including present birth One (17) Number of children of this mother now living, including present birth One

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive on Feb. 2nd, 1923 (Hour A. M. or P. M.) on the date above stated.(23) (Signature) [Signature](24) State whether Physician or Midwife (25) Address of Physician or Midwife CityGiven name Shirley from a supplemental report

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

1015747 101...  
M. B. [Signature] Registrar(27) Filed 11/22/1923 [Signature] 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.