(1) PLACE OF BIRTH

County of Edgefield

Township of Bleckley

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

File No.—For State Registrar Only
17502

Registration District No. 1801 Registered No. 18
(For use of Local Registrar)

(No. ..... St.; ..... Ward)

(2) Full Name of Child Walton B. Gordon

If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL: boy

(4) Twin or Triplet?

(5) Number in order of birth: 1

To be answered only in event of Twins or Triplets

(6) Are Parents Married? yes

(7) DATE OF BIRTH: June 4, 1923 (Month) (Day) (Year)

FATHER.

(8) FULL NAME: Duglas Gordon

(9) PRESENT POSTOFFICE OF FATHER: Pleasant Lane SC

(10) COLOR OR RACE: colord

(11) AGE AT LAST BIRTHDAY: 35 (Years)

(12) BIRTHPLACE: S.C.

(13) OCCUPATION: Farmer

(14) Number of children born to mother, including present birth: 8

MOTHER.

(14) NAME BEFORE MARRIAGE: Mattie Coate

(15) PRESENT POSTOFFICE OF MOTHER: Pleasant Lane SC

(16) COLOR OR RACE: colord

(17) AGE AT LAST BIRTHDAY: 30 (Years)

(18) BIRTHPLACE: S.C.

(19) OCCUPATION: At Home

(21) Number of children of this mother now living, including present birth: 7

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive (Born Alive or Stillborn) at 5:6 (Hour A. M. or P. M.) on the date above stated.

(23) (Signature) Sarah Pixley

(24) State whether Physician or Midwife: Mid wife

(25) Address of Physician or Midwife: Pleasant Lane SC

Given name added from a supplemental report

..... 19 .....
Registrar

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

(27) Filed July 10 1923 (28) W. H. Timmerman
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.