

I. 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 1.

(1) PLACE OF BIRTH

County of Harry  
 Township of Beth  
 OF  
 Inc. Town of .....  
 OF  
 City of .....

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

4201

Registration District No. 25-21

Registered No. 15  
(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 Perlene Jordan

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

(3) SEX OF CHILD Girl (4) Type of Birth 1 (5) Number in order of birth 1 (6) Are Parents Married Yes (7) DATE OF BIRTH Feb 18 1923  
 To be answered only in case of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME William James Jordan  
 (9) PRESENT POSTOFFICE OF FATHER Gunnery St. #3  
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 28 (Year)  
 (12) BIRTHPLACE Harry County SC  
 (13) OCCUPATION Farmer  
 (14) Number of children born to mother, including present birth 2

MOTHER.

(14) NAME BEFORE MARRIAGE Ellen Pearson  
 (15) PRESENT POSTOFFICE OF MOTHER Gunnery St. #3  
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 22 (Year)  
 (18) BIRTHPLACE Harry County SC  
 (19) OCCUPATION  
 (20) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(21) I hereby certify that I attended the birth of this child, who was Born alive at 4:15 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(22) (Signature) J. L. Dizon  
 (23) State whether Physician or Midwife (24) Address of Physician or Midwife

Given name added from a supplemental report

(Signature of Witness necessary only when question 21 is signed by mark)

Feb 20 1923 (25) J. L. Dizon  
 Local Registrar

When there was a stillbirth, the physician, midwife, or other person attending the birth, should make this return. No report is desired of stillbirths.

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