

MARGIN RESERVED FOR BINDING.

WRITE PLAINLY. WITH INFANTS, THIS IS A PERMANENT RECORD. 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.

State of Columbia, Columbia, S. C.

(1) PLACE OF BIRTH

County of Columbia
Township of 3 Miles
or
Inc. Town of Eschard
or
City of

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

FILE—For this Register
31756

Registration District No. 404 Registered No. 115
(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

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

(3) SEX OF CHILD Boy (4) Twin or Triplet No (5) Number in order of birth 3 (6) Age of Child 7 (7) DATE OF BIRTH Nov 7 1928
(Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME Oliver Perry Gook
(9) PRESENT RESIDENCE OF FATHER Eschard S.C.
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 32 (Year)
(12) BIRTHPLACE S.C.
(13) OCCUPATION Merchant
(14) Number of children born to mother, including present birth 3

MOTHER.
(14) NAME BEFORE MARRIAGE Jula Quinn
(15) PRESENT RESIDENCE OF MOTHER Eschard S.C.
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 34 (Year)
(18) BIRTHPLACE S.C.
(19) OCCUPATION Housewife
(20) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(22) (Signature) [Signature] (23) State whether Physician or Midwife Midwife (24) Address of Physician or Midwife Eschard S.C.

Given name added from a supplemental report

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

(26) Filed Nov 8 1928 (27) H. L. Kinard

When there was no attending physician or midwife, then the father, householder, etc., should make the report. If a child breathes even once, it must not be reported as stillborn. No report is desired or accepted before the fifth month of pregnancy.