

735

(1) PLACE OF BIRTH  
County of Roxboro  
Township of .....

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

File No. For State Registrar Only  
**42330**

Inc. Town of Sale City S.C. Registration District No. M-12 Registered No. 39  
(For use of Local Registrar)  
City of ..... (No. .... 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 Charlotte Lassiter } If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL girl (4) Twin or Triplet? 1 (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Nov. 23, 1922  
To be answered only in event of twins or triplets (Name of Month) (Day) (Year)

FATHER.  
(8) FULL NAME Gas Franklin Lassiter  
(9) PRESENT POSTOFFICE OF FATHER Sale City S.C.  
(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 48 (Years)  
(12) BIRTHPLACE N.C.  
(13) OCCUPATION Tobacco Buyer  
(14) Number of children born to mother, including present birth 9

MOTHER.  
(14) NAME BEFORE MARRIAGE Cornelia Melton  
(15) PRESENT POSTOFFICE OF MOTHER Sale City S.C.  
(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 35 (Years)  
(18) BIRTHPLACE S.C.  
(19) OCCUPATION Housewife  
(21) Number of children of this mother now living, including present birth 9

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\***

(22) I hereby certify that I attended the birth of this child, who was Born alive at 4 9 M. N., on the date above stated. (Born live or stillborn) (Hour A.M. or P.M.)

(23) (Signature) B. W. Coe  
(24) State whether Physician or Midwife (25) Address of Physician or Midwife Sale City S.C.

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

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)  
(27) Filed 11/27/22 191..... (28) B. W. Coe 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.

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This is to certify that J. Cornelia Melton Lassiter  
is the mother of Charlotte Lassiter and I know  
that she was born on Nov. 23. 1922. and that the  
reason why her name is not on her birth  
certificate is that she was not named until  
a month after her birth, and when the doctor  
sent her birth certificate in he just put down  
Baby Lassiter. Her name is Charlotte Lassiter.

Cornelia Melton Lassiter

Personally appearing before me the above named  
Cornelia Melton Lassiter, who after being duly  
sworn says that the above statement made by  
her is true and correct to the best of her  
knowledge and belief.

Sworn & before me at  
Effingham S.E. this  
5th day of July 1941.

W. J. Floyd

Magistrate Effingham S.E.