

Form No 1.

(1) PLACE OF BIRTH

County of York

Township of

or Inc. Town of

or City of Rock Hill

(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

54138

Registration District No. 44B Registered No. 49

(For use of Local Registrar)

(2) Full Name of Child. Minnie May Fennell { If child is not yet named, make supplemental report as directed(3) BOY OR GIRL? Girl (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Mar 7 1916 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Brown Fennell(9) PRESENT POSTOFFICE OF FATHER Rock Hill(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 22 (Years)(12) BIRTHPLACE SC.(13) OCCUPATION Common Laborer(20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Minnie Fennell(15) PRESENT POSTOFFICE OF MOTHER Rock Hill(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 23 (Years)(18) BIRTHPLACE SC.(19) OCCUPATION Laborer(21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was S. P. M. at Rock Hill (Born alive or stillborn) (Hour A. M. or P. M.) on the date above stated.(23) (Signature) Minnie Fennell(24) State whether Physician or Midwife (25) Address of Physician or Midwife Midwife

Given name added from a supplemental report

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

(27) Filed 3/15 1916 (28) J. R. Miles 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.

WRITE PLAINLY, WITH UNFADING INK.—THIS IS A PERMANENT RECORD.
N. 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 3.
McGaw, of Columbia.