

## (1) PLACE OF BIRTH

County of *Forever*Township of *Palmetto*or  
Inc. Town of *Palmetto*or  
City of *Palmetto*

(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

42816

Registration District No. *4005*Registered No. *103*

(For use of Local Registrar)

(2) Full Name of Child *Paul M. Harrell*

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

(6) Are Parents Married *Yes*(7) DATE OF BIRTH *Nov. 21, 1955*

(Name of Month) (Day) (Year)

(8) FULL NAME *George M. Harrell*(9) PRESENT POSTOFFICE OF FATHER *Forever SC*(10) COLOR OR RACE *White*(11) AGE AT LAST BIRTHDAY *22*

(Years)

(12) BIRTHPLACE *Harlem County*(13) OCCUPATION *Farmer*(14) Number of children born to mother, including present birth *One*(14) NAME BEFORE MARRIAGE *Ella Lewis*(15) PRESENT POSTOFFICE OF MOTHER *Forever SC*(16) COLOR OR RACE *White*(17) AGE AT LAST BIRTHDAY *19*

(Years)

(18) BIRTHPLACE *Harlem County*(19) OCCUPATION *Housewife*(20) Number of children of this mother now living, including present birth *One*

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was *alive* at *6* *A.M.* on the date above stated.(23) (Signature) *M. J. Harrell*

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife *Forever SC*

Given name added from a supplemental report

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Registrar

(26) Witness

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

(27) Filed *Dec 1, 1955*

(28)

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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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 8.  
N. B. McCaw, of Columbia