

1. PLACE OF BIRTH

County of Charleston
 Township of _____
 or
 Inc. Town of _____
 or
 City of Charleston, S.C.

CERTIFICATE OF BIRTH
 STATE OF SOUTH CAROLINA

Bureau of Vital Statistics
 State Board of Health

FILE No.—For State Registrar Only

6214-a

Registration District No. 9a Registered No. 479A
 (For use of Local Registrar)
 No. 7 Williams Ct. President Ward

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

2. Full Name of Child

Thomas Richard Hasell Jr.

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

1. BOY OR GIRL Boy 2. Twin or Triplet? _____ 3. Number in order of birth _____ 4. Are Parents Married? Yes 5. DATE OF BIRTH March 19, 1925
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER

6. FULL NAME Thomas Richard Hasell

7. PRESENT POSTOFFICE OF FATHER Chas. S.C.

8. COLOR OR RACE Colored 9. AGE AT LAST BIRTHDAY 38 (Years)

10. BIRTHPLACE Georgetown, S.C.

11. OCCUPATION Carpenter

12. Number of children born to mother, including present birth { 1

MOTHER

13. NAME BEFORE MARRIAGE Victoria Alston

14. PRESENT POSTOFFICE OF MOTHER Chas. S.C.

15. COLOR OR RACE Colored 16. AGE AT LAST BIRTHDAY 30 (Years)

17. BIRTHPLACE S. C.

18. OCCUPATION Domestic

19. Number of children of this mother now living, including present birth { 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

20. I hereby certify that I attended the birth of this child, who was born alive at 2:10 P.M. on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)

21. Signature Abbie Jenkins

22. State whether Physician or Midwife Midwife

23. Address of Physician or Midwife Chas. S.C.

Given name added from a supplemental report

24. Witness

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

25. Filed

4/25 1925

26. Anna B. Small
 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.