

Form No. 1

(1) PLACE OF BIRTH

County of Marlboro,.....

Township of Smithville,...

Sec. Town of .....

City of .....

CERTIFICATE OF BIRTH

STATE OF NORTH CAROLINA

Division of Vital Statistics

State Board of Health

Registration District No. 2395

File No. For State Register Only

101

Registration No. 101

Date of Birth 10/10/1918

Sex Male

(2) Full Name of Child Mera Jane Azell,

3. Sex Female 4. Year 1918 5. Month 10 6. Day 10  
To be completed only in case of twins or triplets

FATHER

7. Full Name James H. Azell

8. Occupation Farmer

9. Native of North Carolina

10. Birthplace Smithville, N.C.

11. Occupation Farmer

12. Name of mother Mera Jane Azell

13. Name of mother Mera Jane Azell

14. Occupation Farmer

15. Native of North Carolina

16. Birthplace Smithville, N.C.

17. Occupation Farmer

(3) I hereby certify that I am the father of the child named above, and that the child is my own child.

(4) Signature James H. Azell

(5) Name James H. Azell

(6) Name of child Mera Jane Azell

(7) Name of mother Mera Jane Azell

When these facts are as stated, it is the duty of the registrar to report the same.