

County of Jefferson
 Township of Cape Henry
 or
 Inc. Town of
 or
 City of

STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of Health

4126

Registration District No. 234 Registered No. 3
(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 Robert J. Mansel If child is not yet named, make supplemental report as directed.

(2) BOY OR GIRL <i>boy</i>	(4) Twin or Triplet To be completed only in event of Twin or Triplet	(3) Number in order of birth <i>1</i>	(5) Are Parents Married <i>yes</i>	(7) DATE OF BIRTH <i>Feb 4 1983</i> (Name of Month) (Day) (Year)
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FATHER.

(10) FULL NAME Henry Masel

PRESENT
POSTAGE
OF SATISF

(16) COLOR black (17) AGE AT LAST BIRTHDAY 45

(12) DATE 10/10/71 (TIME) 10:00
LOCATION 1010

(13) **Occupation**

Janur

27) Number of children born to mother, including present birth 1/3

MOTHER.

(14) NAME BEFORE MARRIAGE Cornel Hunt

(14) PRESENT
EVIDENCE
OF INDICES *Holmes, R. H. 2*

(16) COLOR OR HAIR *Black* (17) AGE AT LAST BIRTHDAY *27*

NAME (70) BIRTHPLACE

(10) OCCUPATION Self

Housewife

(21) Number of children of this mother now living, including present birth 1/0

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was... Alma ...at... 7 ...M.,
on the date above stated. (Both alive or stillborn) (Hour A. M. or P. M.)

(26) (Signature) Laverne [Signature]
(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Hodges R. A. 2

Given name added from a supplemental report

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

(27) Filed Feb 16 1923. (28) *A. L. Brown*
Local Registrar.

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.