

FORM NO. 1.

(1) PLACE OF BIRTH

County of GreenvilleTownship of Duncanor
Inc. Town of Duncanor
City of Durham

(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

43058

Registration District No. 22Registered No. 62

(For use of Local Registrar)

(2) Full Name of Child Baby GasnellG. D. SNEL

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

(3) BOY OR GIRL? Girl(4) Twin or Triplet? X(5) Number in order of birth 1(6) Are Parents Married? yes(7) DATE OF BIRTH Dec. 18

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME John R. Gasnell(9) PRESENT POSTOFFICE OF FATHER Greenville(10) COLOR OR RACE White(11) AGE AT LAST BIRTHDAY 44

(Years)

(12) BIRTHPLACE Highland S.C.(13) OCCUPATION Mill work(20) Number of children born to mother, including present birth 10(21) Number of children of this mother now living, including present birth 10

MOTHER.

(14) NAME BEFORE MARRIAGE Ella G. Gasnell(15) PRESENT POSTOFFICE OF MOTHER Greenville(16) COLOR OR RACE White(17) AGE AT LAST BIRTHDAY 37

(Years)

(18) BIRTHPLACE Elberton Ga(19) OCCUPATION House Keeper

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(22) I hereby certify that I attended the birth of this child, who was alive at 5-10 P. M. on the date above stated. (Born alive or stillborn) (Hour, M. or P. M.)(23) (Signature) John Ledbetter M.D.

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

offed 5/5 1945L.A.F.

Registrar

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

(27) Filed Dec 18 1945 (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.

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 5.
McGraw, of Columbia