

(1) PLACE OF BIRTH

County of FlorenceTownship of Lane

In Town of

City of

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

18626

Registration District No. 2009Registered No. 1-3

(For use of Local Registrar)

2) Full Name of Child Eugene Gaspar If child is not yet named, make supplemental report as directed3) BOY OR GIRL? Boy4) Twin or Triplet? 1(5) Number in order of birth 1
To be answered only in case of Twins or Triplets(6) Are Parents Married? yes

(7) DATE OF BIRTH

May 13 1922
(Name of Month) (Day) (Year)

FATHER.

8) FULL NAME

Preston Gaskins

9) PRESENT RESIDENCE OF FATHER

Scranton Co.

10) COLOR OR RACE

Negro

(11) AGE AT LAST BIRTHDAY

21
(Years)

12) BIRTHPLACE

Florence Co

13) OCCUPATION

Farmer

14) Number of children born to mother, including present birth

one

MOTHER.

(14) NAME BEFORE MARRIAGE

Birther Lee

(15) PRESENT RESIDENCE OF MOTHER

Scranton Co.

(16) COLOR OR RACE

Negro

(17) AGE AT LAST BIRTHDAY

17
(Years)

(18) BIRTHPLACE

Florence Co

(19) OCCUPATION

Housewife

(21) 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 Born alive 3 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) W. J. Farmer

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Midwife Scranton Co.

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 6-3-22R. Lee Carter 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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