

Form No. 1

# CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

74695

(1) PLACE OF BIRTH

County of Spartanburg  
Township of Campobello

or  
Inc. Town of

Registration District No. 40-C Registered No. 146  
(For use of Local Registrar)

City of ..... St.; ..... Ward)  
(No. ....)  
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

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

(2) Full Name of Child

(3) BOY OR  
GIRL? Boy

(4) Twin  
or Triplet?

(5) Number in  
order of birth  
To be answered only in event of Twins or Triplets

(6) Are  
Parents  
Married? Yes

(7) DATE OF BIRTH Aug. 19 1916  
(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Charles Gosnell

(9) PRESENT POSTOFFICE OF FATHER Irman S.C.

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 36 (Years)

(12) BIRTHPLACE Greenville Co. S.C.

(13) OCCUPATION Farmer

(14) Number of children born to mother, including present birth { 9

## MOTHER.

(14) NAME BEFORE MARRIAGE Queen Dora Pittendou

(15) PRESENT POSTOFFICE OF MOTHER Irman S.C.

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 38 (Years)

(18) BIRTHPLACE Spartanburg Co

(19) OCCUPATION Housewife

(20) Number of children of this mother now living, including present birth { 9

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was born alive (Born alive or stillborn) (Hour, M. or P. M.) 11:30. A.M.  
on the date above stated.

(23) (Signature) W. J. Hoffman, M.D.

(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Irman S.C.

Given name added from a supplemental report

..... 191.....

Registrar

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

(27) Filed Aug. 19, 1916 (28) E. A. Caspers 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.