

Please complete this form and return it to us with \$2.00 for each copy wanted.



Charleston County Health Department

334 Calhoun Street

Charleston, South Carolina 29401

APPLICATION FOR BIRTH RECORD FOR A PERSON BORN IN

1911, Vol. 80, #910

CHARLESTON COUNTY

Full name at Birth CATHERINE MORTIMER HASELL
(first) (middle) (last)

Date of Birth NOV. 18 1911
(month) (day) (year) 3

Number of this child (1st., 2nd., 3rd., etc.) 2ND. (the first was still born)

Birth Place STREET ADDRESS on BATTERY CHARLESTON -
(Hospital or Street Address) (City) (County)

Father's Name NATHANIEL INGRAHAM HASELL
(first) (middle) (last)

Mother's Maiden Name ALBERTA TELFAIR GOULD
(first) (middle) (last)

NAME OF PERSON APPLYING FOR CERTIFICATE CATHERINE BRUCE GRIDER

If not for person applying -- (Relationship) SELF

AS REQUIRED BY LAW, THE FEE FOR A CERTIFIED COPY OF A BIRTH CERTIFICATE IS.....
\$2.00 per copy. Make Check or Money Order Payable to: CHARLESTON COUNTY HEALTH DEPT.

MAIL TO: DEPT. OF VITAL RECORDS
CHARLESTON COUNTY HEALTH DEPT.
334 CALHOUN ST., CHARLESTON, S.C. 29401

MAILING ADDRESS for COPIES BELOW:
(PLEASE PRINT OR TYPE)

CATHERINE H. BRUCE GRIDER
NAME
P.O. Box 1193
STREET, P.O. box or other
ST. SIMONS ISLAND GA. 31522
CITY STATE Zip Code

RECEIVED
6.00
JUL 23 1976

**CHARLESTON COUNTY
HEALTH DEPARTMENT**

DEPARTMENT OF HEALTH.

RETURN OF A BIRTH.

Nov. 22 1911



Person who shall omit to make and keep the record of births or marriages, or in the certified copy of such register delivered to the City Registrar, shall be subject for each and every such omission or false entry to a fine of not more than fifty dollars and in default of paying the same, shall suffer imprisonment not exceeding thirty days."

1. Full Name of Child (if any) Catherine Martinus Hasell
 2. Sex F. No. of Child of Mother 2nd
 3. Race or Color (if not of the white races) Ch.
 4. Date Nov. 19 - '16
 5. Place of Birth 6 Carrol House S. C.
 6. Full Name of Mother Alberta Gould Hasell
(Maiden Name) Alberta Gould
 7. Mother's Birthplace Georgia
 8. Mother's Residence Panama, Ga.
 9. Full Name of Father W. L. Hasell, Jr.
 10. Father's Occupation U. S. Light House Service
 11. Father's Birthplace S. C.
- Name of Attendant Robt. Wilson, Jr.
Address of Attendant Putney Ave.