Form No. 1

) PLACE OF BIRTH

County of Orangeburg

Township of Ind. Lakes

OR

r. Town of .....

OR

y of .....

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

29640

Registration District No. 3607 Registered No. 25

(For use of Local Registrar)

(No. ..... St.; ..... Ward)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

) Full Name of Child Lionel Cullea

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

BOY OR GIRL? Boy | (4) Twin or Triplet? | (5) Number in order of birth | (6) Are parents Married? Yes | (7) DATE OF BIRTH Sept. 16, 1923

To be answered only in event of Twins or Triplets

FATHER.

FULL NAME Preston Cullea

PRESENT POSTOFFICE OF FATHER Neeses

COLOR OR RACE Blak (11) AGE AT LAST BIRTHDAY 35 (Years)

BIRTHPLACE S C

OCCUPATION Farmer

Number of children born to mother, including present birth 14

MOTHER.

(14) NAME BEFORE MARRIAGE Clara Fortelis

(15) PRESENT POSTOFFICE OF MOTHER Neeses

(16) COLOR OR RACE Blak (17) AGE AT LAST BIRTHDAY 32 (Years)

(18) BIRTHPLACE S C

(19) OCCUPATION Domestic

(21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature) Maggie Sheaton

(24) State whether Physician or Midwife: Midwife

(25) Address of Physician or Midwife: Neeses

...en name added from a supplemental report

..... 19 .... Registrar

(26) Witness .....

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

(27) Filed Sept. 19 23 (28) A. M. Lawrence Local Registrar

...en 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.