

MARGIN RESERVED FOR BINDING.

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.

MCCAW OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Malboro

Township of

or

Inc. Town of Bennettsville

or

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

1952

Registration District No. 33A Registered No. 1

(or use of Local Registrar)

Ward 12-3-69(2) Full Name of Child Carrie Lee Freeman (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL?

Girl

(4) Twin or Triplet?

To be answered only in event of Twins or Triplets

(5) Number in order of birth

(6) Are Parents Married?

Yes

(7) DATE OF

BIRTH 1-2-22
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Carl Freeman

(9) PRESENT POSTOFFICE OF FATHER

Bennettsville S.C.

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

21
(Years)

(12) BIRTHPLACE

N. C.

(13) OCCUPATION

Laborer

(20) Number of children born to mother, including present birth

1

MOTHER.

(14) NAME BEFORE MARRIAGE

Lee S. Kipper

(15) PRESENT POSTOFFICE OF MOTHER

Bennettsville, S.C.

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

19
(Years)

(18) BIRTHPLACE

N. C.

(19) OCCUPATION

Housewife

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

1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was... born... at 4:10 P.M.
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) S. J. Freeman

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

Court Order # 4039
filed 12-22-69
19
Registrar

(26) Witness

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

(27) Filed

Jan 8 22

(28)

Mrs. J. J. Pat.
Local Registrar.

*When there was no attending physician or midwife, when 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.