

(1) PLACE OF BIRTH

C. S.

County of

Township of

or

Inc. Town of

or

City of Charleston, S. C.

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

(2) Full Name of Child Louis Douglas Barden.

File No.—For State Registrar Only

25093

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

Registration District No. 9 A

Registered No. 1151

(For use of Local Registrar)

(No. 293 C East Bay

St.; Ward)

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

3 BOY OR GIRL BOY

4) Twin or Triplet?

(5) Number in order of birth

(6) Are Parents Married?

(7) DATE OF

To be answered only in event of Twins or Triplets

Yes

BIRTH Aug. 11, 1922
(Name of Month) (Day) (Year)

FATHER.

8 FULL NAME Louis Lonnie Barden.

9 PRESENT POSTOFFICE OF FATHER

293 C East Bay.

10 COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY 24
(Years)

12 BIRTHPLACE

Holly Springs Miss

13 OCCUPATION

Main street Ky.

20 Number of children born to mother, including present birth

One

MOTHER.

(14) NAME BEFORE MARRIAGE

Nellie Morse.

(15) PRESENT POSTOFFICE OF MOTHER

293 C East Bay

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY 33
(Years)

(18) BIRTHPLACE

Caluda S C

(19) OCCUPATION

Home duties

(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 at 10:45 A.M., on the date above stated.
(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) R. B. Borden

(24) State whether Physician or Midwife

M D

(25) Address of Physician or Midwife

Citizens Bldg.

Given name added from a supplemental report

(26) Witness

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

(27) Filed 8/18/22

19

(28)

Local Registrar

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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