CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only: 3733

(1) PLACE OF BIRTH

County of Clarendon

Township of Concord

or

~~Inc.~~ Town of Summerton

Registration District No. 130.2. Registered No. 11 (For use of Local Registrar)

or

City of ..... (No. ..... St. ..... Ward)

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

(2) Full Name of Child Herman C. Barfield (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL	(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parents Married?	(7) DATE OF BIRTH
boy			yes	Feb 5 1922 (Name of Month) (Day) (Year)

To be answered only in event of Twins or Triplets

FATHER		MOTHER	
(8) FULL NAME	J. E. Barfield	(14) NAME BEFORE MARRIAGE	Maggie Dyson
(9) PRESENT POSTOFFICE OF FATHER	Summerton R.F.D.	(15) PRESENT POSTOFFICE OF MOTHER	Summerton R.F.D.
(10) COLOR OR RACE	White (11) AGE AT LAST BIRTHDAY 36 (Years)	(16) COLOR OR RACE	White (17) AGE AT LAST BIRTHDAY 22 (Years)
(12) BIRTHPLACE	Clarendon Co.	(18) BIRTHPLACE	Clarendon Co.
(13) OCCUPATION	Electrician	(19) OCCUPATION	Home-Wife
(20) Number of children born to mother, including present birth	2	(21) Number of children of this mother now living, including present birth	2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive (Born alive or stillborn) at 7 30 A.M. (Hour A. M. or P. M.) on the date above stated.

(23) (Signature) Mary Weathers

(24) State whether Physician or Midwife: Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report ..... 19 .... Registrar

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

(27) Filed Feb 28 1922 (28) T. E. Wilkins 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.

Moore of Columbia, Columbia, S. C.
FIRST COPY, NO. 1; THE OTHER, NO. 2, etc., in question 4.