

(1) PLACE OF BIRTH

County of Barnstable
 Township of Middlebury
 or
 Inc. Town of
 or
 City of

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

10003

Registration District No. 1403Registered No. 114
(For use of Local Registrar)St. Ward)
(No. give name of same instead of street and number.)(2) Full Name of Child Carrie May Ford
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)
If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Girl (4) Twin or Triplet? (5) Number in order of birth (6) Sex Female (7) DATE OF BIRTH 4/15/22
 (Name of Month) (Day) (Year)
 To be answered only in event of Twin or Triplet

FATHER

(8) FULL NAME Lee Ford
 (9) PRESENT POSTOFFICE OF FATHER Barnstable, S.C.
 (10) COLOR OR RACE Col (11) AGE AT LAST BIRTHDAY 25 (Year)
 (12) BIRTHPLACE Barnstable Co., S.C.
 (13) OCCUPATION Farming

MOTHER

(14) NAME BEFORE MARRIAGE Ella May Perkins
 (15) PRESENT POSTOFFICE OF MOTHER Barnstable, S.C.
 (16) COLOR OR RACE Col (17) AGE AT LAST BIRTHDAY 22 (Year)
 (18) BIRTHPLACE Barnstable Co., S.C.
 (19) OCCUPATION Domestic
 (20) Number of children born to mother now living, including present birth Four

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(21) I hereby certify that I attended the birth of this child, who was Barbara Culbreth, at 2 P.M.,
 (Born alive or stillborn) (Hour A.M. or P.M.)
 on the date above stated.

(22) (Signature) Ella May Perkins
 (23) State whether Physician or Midwife Midwife (24) Address of Physician or Midwife Barnstable, S.C.

Given name added from a supplemental report

(25) Witness (Signature of Witness necessary only when question 23 is signed by mark)
 (26) Filed 4/17/22 (27) Local Registrar Herbert F. ...

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.