

Form No. 1.

(1) PLACE OF BIRTH

County of Anderson

Township of Beltan

or Town of Beltan

or City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No. For State Registrar Only
41553

Registration District No. 300 Registered No. 14
(For use of Local Registrar)

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. Paul Rice Williams } If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? <u>Boy</u>	(4) Twin or Triplet? <u>—</u> <small>To be answered only in event of Twins or Triplets</small>	(5) Number in order of birth <u>2</u>	(6) Are Parents Married? <u>No</u>	(7) DATE OF BIRTH <u>Feb 16th 1916</u> <small>(Name of Month) (Day) (Year)</small>
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FATHER.

MOTHER.

(8) FULL NAME Will Gibert

(14) NAME BEFORE MARRIAGE Miss Williams

(9) PRESENT POSTOFFICE OF FATHER Beltan S.C.

(15) PRESENT POSTOFFICE OF MOTHER Beltan S.C.

(10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 24
(Years)

(16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 20
(Years)

(12) BIRTHPLACE Sumner S.C.

(18) BIRTHPLACE Beltan S.C.

(13) OCCUPATION Lavender & Cotton mill

(19) OCCUPATION House work

(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 born alive at 7:45 P. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) C. S. ... M. D.

(24) State whether Physician or Midwife (25) Address of Physician or Midwife Beltan, S.C.

Given name added from a supplemental report
..... 191.....
.....
Registrar

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

(27) Filed Feb 24 1916 (28) J. S. ... 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.

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
MARRIAGE LICENSES, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
N. E.—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.
McCaig, of Columbia