

## (1) PLACE OF BIRTH

County of Marlboro  
 Township of Barnett  
 or  
 Inc. Town of .....  
 or  
 City of .....

## CERTIFICATE OF BIRTH

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

No. 44144

Registration District No. 330A Registered No. ....  
 (For use of Local Registrar)

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

(2) Full Name of Child Christina Williams If child is not yet named, make supplemental report as directed

(1) SEX OF CHILD <u>girl</u>	(4) Type or Figure To be entered only in case of Twins or Triplets	(3) Number in order of birth	(5) Age <u>year</u>	(6) DATE OF BIRTH <u>12-29-24</u> (Month) (Day) (Year)
FATHER			MOTHER	
(14) FULL NAME <u>Lee Williams</u>			(14) NAME BEFORE MARRIAGE <u>Christina Williams</u>	
(15) PRESENT RESIDENCE OF FATHER <u>Barnett</u>			(15) PRESENT RESIDENCE OF MOTHER <u>Barnett</u>	
(16) COLOR OR RACE <u>Black</u>	(17) AGE AT LAST BIRTHDAY <u>24</u> (Years)	(16) COLOR OR RACE <u>Black</u>	(17) AGE AT LAST BIRTHDAY <u>24</u> (Years)	
(18) BIRTHPLACE <u>Marlboro</u>			(18) BIRTHPLACE <u>Flamers</u>	
(19) OCCUPATION <u>Farmer</u>			(19) OCCUPATION <u>Domestic</u>	
(20) Number of children born to mother, including present birth <u>2</u>			(21) Number of children of this mother now living, including present birth <u>1</u>	

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Born alive at 11 A.M. on the date above stated.  
 (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Vernon Williams

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife  
Barnett

Given name added from a supplemental report

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

(27) Date Jan-19-1924 (28) P. L. Miller

19  
 Registrar

\*When there was no attending physician or midwife, then the father, householder, etc., should report. If a child breathes even once, it must not be reported as stillborn. No report is needed before the fifth month of pregnancy.