

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only
83649

(1) PLACE OF BIRTH
County of Sumter
Township of Privateer
or
Inc. Town of
or
City of

Registration District No. H104 Registered No. 113
(For use of Local Registrar)

(2) Full Name of Child Titus Jackson Williams 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? yes (7) DATE OF BIRTH Oct 1, 1916
To be answered only in case of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME Wesley Williams
(9) PRESENT POSTOFFICE OF FATHER Sumter S.C. R#2
(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 38 (Years)
(12) BIRTHPLACE Sumter Co S.C.
(13) OCCUPATION Farming
(20) Number of children born to mother, including present birth 3

MOTHER.
(14) NAME BEFORE MARRIAGE Jessie Ludd
(15) PRESENT POSTOFFICE OF MOTHER Sumter S.C. R#2
(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 25 (Years)
(18) BIRTHPLACE Sumter Co S.C.
(19) OCCUPATION Housewife
(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 5 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Gamma Montgomery
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Sumter S.C. R#2

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

(26) Witness Silva B. Kolb
(Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed Oct 6, 1916 (28) S. B. Kolb Local Registrar

MARGIN RESERVED FOR BINDING.
WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
N.B.—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.
McCaw, of Columbia

*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.

M F I L M