

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.

## (1) PLACE OF BIRTH

County of EdgelyfieldTownship of PickensInc. Town of orCity of or

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

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

72544

Registration District No. 1808 Registered No. 4

(For use of Local Registrar)

(2) Full Name of Child Davis Williams

If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Boys(4) Twin or Triplet? Twins(5) Number in order of birth 2(6) Are Parents Married? No(7) DATE OF BIRTH Aug 6 1916  
(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Jim Williams(9) PRESENT POSTOFFICE OF FATHER Edgelyfield S.C.(10) COLOR OR RACE N(11) AGE AT LAST BIRTHDAY 40  
(Years)(12) BIRTHPLACE Edgelyfield(13) OCCUPATION Farmer(20) Number of children born to mother, including present birth 2

## MOTHER.

(14) NAME BEFORE MARRIAGE Lucy Burroughs(15) PRESENT POSTOFFICE OF MOTHER Edgelyfield S.C.(16) COLOR OR RACE N(17) AGE AT LAST BIRTHDAY 32  
(Years)(18) BIRTHPLACE Edgelyfield(19) OCCUPATION House Duties(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 at 5 A M.,  
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) A. R. Nicholson M.D.

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Edgelyfield S.C.

Given name added from a supplemental report

....., 191....

Registrar

(26) Witness

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

(27) Filed Aug 8 1916

(28)

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.