

Form No 1.

**CERTIFICATE OF BIRTH**  
STATE OF SOUTH CAROLINA.  
Bureau of Vital Statistics  
State Board of Health

File No.—For State Registrar Only  
**45835**

(1) PLACE OF BIRTH  
County of Christiansburg  
Township of Old Bluff  
or  
Inc. Town of .....  
or  
City of .....  
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

Registration District No. 1206 Registered No. 16  
(For use of Local Registrar)

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

(3) BOY OR GIRL? Boy (4) Twin or Triplet? No (5) Number in order of birth 1st (6) Are Parents Married? Yes (7) DATE OF BIRTH Jan 21 1916  
(Name of Month) (Day) (Year)

**FATHER.**  
(8) FULL NAME E. S. Williams  
(9) PRESENT POSTOFFICE OF FATHER Laurens, S.C.  
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 26 (Years)  
(12) BIRTHPLACE Laurens County  
(13) OCCUPATION Wage Slave  
(20) Number of children born to mother, including present birth { 4 }

**MOTHER.**  
(14) NAME BEFORE MARRIAGE Bessie Haile  
(15) PRESENT POSTOFFICE OF MOTHER Jefferson, S.C.  
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 20 (Years)  
(18) BIRTHPLACE Old Stone Township  
(19) OCCUPATION Housewife  
(21) Number of children of this mother now living, including present birth { 4 }

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\***

(22) I hereby certify that I attended the birth of this child, who was born at 7:00 a.m. on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)

(23) (Signature) Edmund T. Anderson  
(24) State whether Physician or Midwife (25) Address of Physician or Midwife Jefferson, S.C. R. 1-1

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

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

(27) Filed 1/25 1916 (28) J. E. Coats  
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.