

(1) PLACE OF BIRTH

County of Richland
 Township of Center
 OR
 Inc. Town of
 OR
 City of

CERTIFICATE OF BIRTH

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

Registration District No. 3801

File No.—For State Registrar Only
36259

Registered No. 36259
 (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 Alberta Williams

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

(3) ☒ BOY OR GIRL? girl (4) Twin or Triplet? No (5) Number in order of birth 9 (6) Are Parents Married? yes (7) DATE OF BIRTH July 25, 1922
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME John Williams
 (9) PRESENT POSTOFFICE OF FATHER Blaney SC #3
 (10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 32
 (12) BIRTHPLACE Kershaw co SC
 (13) OCCUPATION Farming

MOTHER.

(14) NAME BEFORE MARRIAGE Lizzie Mack
 (15) PRESENT POSTOFFICE OF MOTHER Blaney SC #3
 (16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 26
 (18) BIRTHPLACE Richland co SC
 (19) OCCUPATION House wife
 (20) Number of children born to mother, including present birth 9
 (21) Number of children of this mother now living, including present birth 5

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive 9 at 9 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Jane Wilson(24) State whether Physician or Midwife midwife(25) Address of Physician or Midwife Blaney SC #3

Given name added from a supplemental report

(26) Witness

(Signature of Witness necessary only when question 22 is signed by mark)

(27) Filed Aug 1, 1922 (28) Willie Farmer 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.

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, COLUMBIA, S. C.