

Form No. 1
 MARGIN RESERVED FOR BINDING
 WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD
 N. B.—In case of TWINS OR TRIPLETS use SEPARATE BLANKS FOR EACH CHILD and mark the
 FIRST-BORN, NO. 1, THE OTHER, NO. 2, etc., in question 2.
 Secular as furnished, Columbia, S. C.

(1) PLACE OF BIRTH

County of Charleston
 Township of Charleston
 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.)
 (No. St.; Ward)

(2) Full Name of Child Leodore McWilliam

File No.—For State Registrar Only

784

Registration District No. 17.01 Registered No. 4
 (For use of Local Registrar)

(3) BOY OR GIRL <u>Girl</u>	(4) Twin or Triplet? <u>No</u>	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Jan 7 1922</u> (Month) (Day) (Year)
FATHER (8) FULL NAME <u>Elliott McWilliam</u> (9) PRESENT POSTOFFICE OF FATHER <u>Charleston SC</u> (10) COLOR OR RACE <u>Black</u> (11) AGE AT LAST BIRTHDAY <u>27</u> (Years) (12) BIRTHPLACE <u>SC</u> (13) OCCUPATION <u>Farmer</u>			MOTHER (14) NAME BEFORE MARRIAGE <u>Maggie Freeman</u> (15) PRESENT POSTOFFICE OF MOTHER <u>Charleston SC</u> (16) COLOR OR RACE <u>Black</u> (17) AGE AT LAST BIRTHDAY <u>25</u> (Years) (18) BIRTHPLACE <u>SC</u> (19) OCCUPATION <u>Farm laborer</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>2</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Alva at 7:30 A.M.,
 on the date above stated. (Born alive or stillborn) (Hour, M. or P. M.)

(23) (Signature) Mary Threlkeld
 (24) State, whether Physician or Midwife Midwife (25) Address of Physician or Midwife Charleston SC

Given name added from a supplemental report

 19 ..
 Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
Jan. 11. 1922 (27) Filed Jan. 11. 1922 (28) S. D. Ingram
 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.

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