

(1) PLACE OF BIRTH

County of LillenTownship of Shilohor
Inc. Town ofor
City of

(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

Registration District No. 1602 Registered No. 80
(For use of Local Registrar)File No.—For State Registrar Only
17417(2) Full Name of Child Woodrow Williams

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

(1) SEX OF CHILD <u>Boy</u>	(4) Twin or Triplet? To be answered only in event of Twins or Triplets	(3) Number in order of birth	(5) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>June 28 1927</u> (Month of Month Day Year)
FATHER.			MOTHER.	
(9) FULL NAME <u>Joe Williams</u>			(14) NAME BEFORE MARRIAGE <u>Janice Perry</u>	
(10) PRESENT RESIDENCE OF FATHER <u>Montgomery SC</u>			(15) PRESENT RESIDENCE OF MOTHER <u>Montgomery SC</u>	
(16) COLOR OR RACE <u>White</u>	(17) AGE AT LAST BIRTHDAY <u>29</u> (Years)	(18) COLOR OR RACE <u>White</u>		
(12) BIRTHPLACE <u>SC</u>		(19) BIRTHPLACE <u>SC</u>		
(13) OCCUPATION <u>Farmer</u>		(20) OCCUPATION <u>Housewife</u>		
(26) Number of children born to mother, including present birth <u>Seven</u>			(21) Number of children of this mother now living, including present birth <u>Seven</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE(22) I hereby certify that I attended the birth of this child, who was at M.,
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) W. H. H. H.
(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife 127 H. H. St.

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 22 is signed by mark)
(27) Local Registrar W. H. H. H.

*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.