

(1) PLACE OF BIRTH

County of Newberry  
Township of Johns River  
or  
Inc. Town of  
or  
City of

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only  
73997

Registration District No. 3402 Registered No. 177  
(For use of Local Registrar)

(2) Full Name of Child Carry Lee 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 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Aug. 1<sup>st</sup> 1916  
To be answered only in event of twins or triplets (Name of Month) (Day) (Year)

FATHER.  
(8) FULL NAME Jack Williams  
(9) PRESENT POSTOFFICE OF FATHER Newberry S. C. R. D.  
(10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY about 30 (Years)  
(12) BIRTHPLACE Unknown  
(13) OCCUPATION Labourer  
(20) Number of children born to mother, including present birth { 1 }

MOTHER.  
(14) NAME BEFORE MARRIAGE Vivie Eppes  
(15) PRESENT POSTOFFICE OF MOTHER Whitcure S. C. R. D.  
(16) COLOR OR RACE Black (17) AGE AT LAST BIRTHDAY 22 (Years)  
(18) BIRTHPLACE Newberry Co S. C.  
(19) OCCUPATION Cook  
(21) Number of children of this mother now living, including present birth { 1 }

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was born dead 4:30 A. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. H. Moore M.D.  
(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Whitcure S. C.

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

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark) J. H. Moore  
(27) Filed Aug. 1 1916 (28) J. H. Moore 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.