

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

File No.—For State Registrar Only
90886

County of *Maries*
Township of *Lynch*
or
Town of
or
City of

Registration District No. *3702* Registered No. *114*
(For use of Local Registrar)
By Court Order 9-22-72 St.;
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child *William James Leggette Davis* } If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? <i>Boy</i>	(4) Twin or Triplet? <i>/</i>	(5) Number in order of birth <i>4</i>	(6) Are Parents Married? <i>Yes</i>	(7) DATE OF BIRTH <i>Dec 25-1972</i>
FATHER.			MOTHER.	
(8) FULL NAME <i>Presley Davis</i>	(14) NAME BEFORE MARRIAGE <i>Annie Williams</i>			
(9) PRESENT POSTOFFICE OF FATHER <i>Centenary</i>	(15) PRESENT POSTOFFICE OF MOTHER <i>Centenary</i>			
(10) COLOR OR RACE <i>Black</i>	(11) AGE AT LAST BIRTHDAY <i>30</i>	(16) COLOR OR RACE <i>Black</i>	(17) AGE AT LAST BIRTHDAY <i>28</i>	
(12) BIRTHPLACE <i>Centenary SC</i>	(18) BIRTHPLACE <i>Centenary SC</i>			
(13) OCCUPATION <i>Farm laborer</i>	(19) OCCUPATION <i>Farm laborer</i>			
(20) Number of children born to mother, including present birth <i>4</i>	(21) Number of children of this mother now living, including present birth <i>3</i>			

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was *alive* at *12-15 P.M.* on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) *Dr. Harold Leonard*
(24) State whether Physician or Midwife *midwife* (25) Address of Physician or Midwife *Centenary SC*

Given name added from a supplemental report

Court Order # 5349
filed October 11, 1972.
Linda S. Martins
Clerk Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)

(27) Filled *Jan 5 1973* (28) *W. A. ...* 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.