

(1) PLACE OF BIRTH

County of Spartanburg
 Township of Rock Spring
 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

91766

Registration District No. 40-CRegistered No. 271
(For use of Local Registrar)

(No. St.; Ward)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Roy Williams

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

(3) BOY OR GIRL Boy (4) Twin or Triplet? Twin (5) Number in order of birth 2 (6) Are Parents Married? Yes (7) DATE OF BIRTH Dec 24, 1916
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Albert Williams
 (9) PRESENT POSTOFFICE OF FATHER Sumner SC
 (10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 30 (Years)
 (12) BIRTHPLACE Spartanburg Co SC
 (13) OCCUPATION Farmer

MOTHER.

(14) NAME BEFORE MARRIAGE Alice Evans
 (15) PRESENT POSTOFFICE OF MOTHER Sumner SC
 (16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 36 (Years)
 (18) BIRTHPLACE Spartanburg Co SC
 (19) OCCUPATION Housewife

(20) Number of children born to mother, including present birth 10(21) Number of children of this mother now living, including present birth 9

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 3:20 a.m. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Matilda Sobos(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Sumner SC

Given name added from a supplemental report

(26) Witness

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

(27) Filed Dec 26, 1916(28) Ed Carey 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.