

MARGIN RESERVED FOR INDEXING.
WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the FIRST-BORN, SECOND, etc., in question 5.

(1) PLACE OF BIRTH

County of Sumter
Township of Lowndes
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

12971

Registration District No. Registered No. 31
(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 Asche Williams If child is not yet named, make supplemental report as directed

3) BOY OR GIRL? Boy 4) Twin or Triplet? No 5) Number in order of birth 1 6) Are Parents Married? no 7) DATE OF BIRTH: Feb. 1, 1922
(Name of Month) (Day) (Year)

FATHER.		MOTHER.	
(8) FULL NAME <u>Illegitimate</u>	(14) NAME BEFORE MARRIAGE <u>Agnes William</u>	(9) PRESENT POSTOFFICE OF FATHER	(15) PRESENT POSTOFFICE OF MOTHER <u>Sumter S.C.</u>
(10) COLOR OR RACE	(11) AGE AT LAST BIRTHDAY (Years)	(16) COLOR OR RACE <u>negro</u>	(17) AGE AT LAST BIRTHDAY (Years) <u>23</u>
(12) BIRTHPLACE	(18) OCCUPATION <u>at home</u>	(18) BIRTHPLACE	(19) OCCUPATION
(20) Number of children born to mother, including present birth	(21) Number of children of this mother now living, including present birth		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature) Phillips Scott (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Baylors St

Given name added from a supplemental report
(26) Witness J. J. Kinnery (Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed Feb. 12, 1922 (28) Wm. J. R. Kinnery 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.