

WHITE PLAINLY, WITH UNFADING INK—WRITE IN A PERMANENT MANNER.
N II.—In case of TWINS OR TRIPLETS use a SEPARATE REPORT FOR EACH CHILD, and mark the FIRST-BORN, No. 1 THE OTHER, No. 2, etc. in question 6.
MADE IN COLUMBIA, GEORGIA, U. S. A.

(1) PLACE OF BIRTH

County of Orangeburg
Township of Holly Hill
or
Inc. Town of Holly Hill
or
City of Holly Hill

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

Registration District No. 3609

File No.—For State Registrar Only
2198

Registered No. 76
(For use of Local Registrar)

(2) Full Name of Child

Melina 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

Jan 27 1912

FATHER.

(8) FULL NAME

Sam Williams

(9) PRESENT POSTOFFICE OF FATHER

Holly Hill S.C.

(10) COLOR OR RACE

Negro

(11) AGE AT LAST BIRTHDAY

20

(12) BIRTHPLACE

S.C.

(13) OCCUPATION

Farming

(20) Number of children born to mother, including present birth

3

MOTHER.

(14) NAME BEFORE MARRIAGE

Maggie Anderson

(15) PRESENT POSTOFFICE OF MOTHER

Holly Hill S.C.

(16) COLOR OR RACE

Negro

(17) AGE AT LAST BIRTHDAY

21

(18) BIRTHPLACE

S.C.

(19) OCCUPATION

Home Aid

(21) Number of children of this mother now living, including present birth

3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 10 P. M. on the date above stated.

(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

Samuel S. Shaw

(24) State whether

Physician or Midwife

(25) Address of Physician or Midwife

Holly Hill S.C.

Given name added from a supplemental report

(26) Witness

M. Heesman

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

1912
Registrar

(27) Filed

Feb 4 1912

(28)

H. M. Heesman
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.