

MARGIN RESERVED FOR BINDING.
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 McCaw, of Columbia.

(1) PLACE OF BIRTH

County of

Township of

or
Inc. Town of

City of

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

90423

Registration District No.

Registered No.

(For use of Local Registrar)

(2) Full Name of Child

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

(3) BOY OR GIRL?

Boy

(4) Twin or Triplet?

(5) Number in order of birth

To be answered only in case of Twins or Triplets

(6) Are Parents Married?

No

(7) DATE OF BIRTH

Dec. 10, 1916

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Charles Williams

(9) PRESENT POSTOFFICE OF FATHER

Ridgeland

(10) COLOR OR RACE

Col

(11) AGE AT LAST BIRTHDAY

36

(Years)

(12) BIRTHPLACE

S.C.

(13) OCCUPATION

Laborer

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

2

MOTHER.

(14) NAME BEFORE MARRIAGE

Kate Williams

(15) PRESENT POSTOFFICE OF MOTHER

Ridgeland S.C.

(16) COLOR OR RACE

Col

(17) AGE AT LAST BIRTHDAY

32

(Years)

(18) BIRTHPLACE

S.C.

(19) OCCUPATION

Fieldhand

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

2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was

born at 11 A.M. on the date above stated.

(23) (Signature)

Elizabeth Williams

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

(26) Witness

Paul H. Law

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

(27) Filed

12/21/16

(28)

Paul H. Law

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.