

## (1) PLACE OF BIRTH

County of Newberry  
 Township of #9  
 or  
 Inc. Town of Prosperity  
 or  
 City of Prosperity

## CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only  
**49984**

Registration District No. 3410 Registered No. 13  
 (For use of Local Registrar)

City of Prosperity (No. 13 St. 13 Ward 13)  
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child. Mary Lee 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  
Take answered only in event of Twins or Triplets (6) Are Parents Married? Yes (7) DATE OF BIRTH Feb. 19, 1916  
(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME John Williams

(9) PRESENT POSTOFFICE OF FATHER Prosperity, S.C.

(10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY 32  
(Years)

(12) BIRTHPLACE Prosperity, S.C.

(13) OCCUPATION Sawing

(20) Number of children born to mother, including present birth 5

## MOTHER.

(14) NAME BEFORE MARRIAGE Mary Adell

(15) PRESENT POSTOFFICE OF MOTHER Prosperity, S.C.

(16) COLOR OR RACE Black (17) AGE AT LAST BIRTHDAY 31  
(Years)

(18) BIRTHPLACE Kiblers

(19) OCCUPATION Housekeeper

(21) Number of children of this mother now living, including present birth 5

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was alive at 9:30 a.m. on the date above stated.  
 (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Miss M. T. Gibson

(24) State whether Physician or Midwife (25) Midwife of Physician or Midwife Prosperity, S.C.

Given name added from a supplemental report

....., 191.....

Registrar

(26) Witness W. T. Gibson  
 (Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed Feb. 20, 1916 (28) W. T. Gibson  
 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.

N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the  
 McCaw, of Columbia FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.