

(1) PLACE OF BIRTH

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

31707

County of Pickens
Township of Central
or
Inc. Town of
or
City of

Registration District No. 3.7.2 Registered No. 180
(For use of Local Registrar)

(2) Full Name of Child Mildred Beatrice Williams (No. SL: Ward) (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(3) BOY OR GIRL? Girl (4) Twin or Triplet? ☒ (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Sept. 14, 1922 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Geo. V. Williams
(9) PRESENT POSTOFFICE OF FATHER Catachee, S.C.
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 27 (Years)
(12) BIRTHPLACE S.C.
(13) OCCUPATION Weaver

MOTHER.

(14) NAME BEFORE MARRIAGE Ressie Perry
(15) PRESENT POSTOFFICE OF MOTHER Catachee, S.C.
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 20 (Years)
(18) BIRTHPLACE S.C.
(19) OCCUPATION ✓

(20) Number of children born to mother, including present birth 2

(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 alive at 2 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. L. Webb
(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Catachee, S.C.

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

(27) Filed Oct 5, 1922 (28) J. D. Bearden Local Registrar

Given name added from a supplemental report

Oct 5, 1922
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.

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