

(1) PLACE OF BIRTH

County of Sumter S.C.

Township of .....

or Inc. Town of .....

or 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

No. for State Registrar Only  
**22756**

Registration District No. .... Registered No. 72  
(For use of Local Registrar)

(2) Full Name of Child May 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 July 28 (Year) 1913

**FATHER.**  
(8) FULL NAME John W. Williams  
(9) PRESENT POSTOFFICE OF FATHER Sumter S.C. 1073 A  
(10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 34 (Year) 1909  
(12) BIRTHPLACE Kershaw County  
(13) OCCUPATION Minister  
(14) Number of children born to mother, including present birth 8

**MOTHER.**  
(14) NAME BEFORE MARRIAGE Clara Perry  
(15) PRESENT POSTOFFICE OF MOTHER Sumter S.C. 1073 A  
(16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 28 (Year) 1905  
(18) BIRTHPLACE Kershaw County  
(19) OCCUPATION Housekeeping  
(21) Number of children of this mother now living, including present birth 1

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\***  
(22) I hereby certify that I attended the birth of this child, who was born alive at S.C. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)  
(23) (Signature) Agnes J. ...  
(24) State whether Physician or Midwife midwife (25) Address of Physician or Midwife Sumter S.C.

(Given name added from a supplemental report)  
Matilda Williams  
19 ..  
Registrar

(26) Witness W. H. ...  
(Signature of Witness necessary only when question 23 is signed by mark)  
(27) Filed 10 23 (28) Paul H. ... 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.