

WHITE PLAINLY. INK, WITH UNFADING INK—THIS IS A PERMANENT RECORD. IN CASE OF TWINS OR TRIPLETS, USE A SEPARATE BLANK FOR EACH CHILD, AND MARK THE FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 6.

(1) PLACE OF BIRTH  
 County of Florence, S.C.  
 Township of Effingham  
 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

File No.—For State Registrar  
4166

Registration District No. 22 Registered No. 15  
 (For use of Local Registrar)

(No. .... St.; .... Ward)

(2) Full Name of Child Earl Williams If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL <u>Boy</u>	(4) Twin or Triplet? To be answered only in event of Twins or Triplets	(5) Number in order of birth	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Feb 5-22</u> (Name of Month) (Day) (Year)
FATHER.			MOTHER.	
(8) FULL NAME <u>Danac Williams</u>			(14) NAME BEFORE MARRIAGE <u>Betty Hawkins</u>	
(9) PRESENT POSTOFFICE OF FATHER <u>Effingham, S.C.</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Effingham, S.C.</u>	
(10) COLOR OR RACE <u>Chad</u>			(16) COLOR OR RACE <u>White</u>	
(11) AGE AT LAST BIRTHDAY <u>1</u> (Year)			(17) AGE AT LAST BIRTHDAY <u>23</u> (Year)	
(12) BIRTHPLACE <u>Effingham, S.C.</u>			(18) BIRTHPLACE <u>Effingham, S.C.</u>	
(13) OCCUPATION <u>Farmer</u>			(19) OCCUPATION <u>Farmer</u>	
(20) Number of children born to mother, including present birth <u>1</u>			(21) Number of children of this mother now living, including present birth <u>1</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 1922 (Born Alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Emma Williams

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife  
Effingham, S.C.

Given name added from a supplemental report

(26) Witness John Williams (Signature of Witness necessary only when question 22 is signed by mark)

(27) Filed Feb 12 1922 (28) John Williams Local Registrar

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..... there was no attending physician or midwife, then the father, householder, etc., should make this return. child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.

When there is 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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