

(1) PLACE OF BIRTH

County of

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

File No. — For State Registrar Only

12784

Registration District No. 40-a

Registered No. 71

(For use of Local Registrar)

(No. 144 Drayton Ave. St. Ward)

(2) Full Name of Child Baby Williams

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

(3) BOY OR GIRL?

Boy

(4) Twin or Triplet?

Twin

(5) Number in order of birth 1

To be answered only in event of Twin or Triplet

(6) Are Parents Married?

yes

(7) DATE OF BIRTH

Mar. 1 1922

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

J. I. M. Williams

(9) PRESENT POSTOFFICE OF FATHER

Spartanburg, S.C.

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

28

(Years)

(12) BIRTHPLACE

S. C.

(13) OCCUPATION

Clerk in Co. Supervisor's Office

MOTHER.

(14) NAME BEFORE MARRIAGE

Kate Wood

(15) PRESENT POSTOFFICE OF MOTHER

Spartanburg, S.C.

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

27

(Years)

(18) BIRTHPLACE

S. C.

(19) OCCUPATION

Housewife

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

4

(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 6:30 P.M., on the date above stated. (Born alive or stillborn) (Hour: A. M. or P. M.)

(23) (Signature)

J. E. Craddock

(24) State whether Physician or Midwife

Physician

(25) Address of Physician or Midwife

Spartanburg, S.C.

Given name added from a supplemental report

(26) Witness

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

(27) Filed

5-1-

1922

(28)

Jas Copes

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.

A CASE OF TWINS OR TRIPLETS? — SEPARATE BLANK FOR EACH CHILD, and mark the FIRST-BORN, No. 1; THIS CHILD, No. 2, etc., in question 5. BUREAU OF COLUMBIA, COLUMBIA, S. C.