

FORM NO. 8. MARRIAGE REGISTRATION. THIS IS A PERMANENT RECORD. WHITE PLAINS. WITH ENLARGING INK—THIS IS A PERMANENT RECORD. N. B.—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 3. McGraw-Hill, N. Y.

(1) PLACE OF BIRTH  
 County of Anderson STATE OF SOUTH CAROLINA.  
 Bureau of Vital Statistics  
 Township of Williamston State Board of Health  
 or  
 Inc. Town of ..... Registration District No. 314 Registered No. 33  
 or  
 City of ..... (No. .... St.; ..... Ward)  
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

File No. For State Registrar Only  
63073

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

(3) BOY OR GIRL? boy (4) Twin or Triplet? — (5) Number in order of birth 1st (6) Are Parents Married? N (7) DATE OF BIRTH June 14, 1916  
To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

**FATHER.**

(8) FULL NAME J. L. Fowler  
 (9) PRESENT POSTOFFICE OF FATHER Waynesville SC  
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 20 (Years)  
 (12) BIRTHPLACE Anderson County  
 (13) OCCUPATION Farmer Laborer  
 (14) Number of children born to mother, including present birth one

**MOTHER.**

(14) NAME BEFORE MARRIAGE Lebbie Williams  
 (15) PRESENT POSTOFFICE OF MOTHER Waynesville SC  
 (16) COLOR OR RACE Black (17) AGE AT LAST BIRTHDAY 16 (Years)  
 (18) BIRTHPLACE Anderson County  
 (19) OCCUPATION Domestic  
 (21) Number of children of this mother now living, including present birth one

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\***

(22) I hereby certify that I attended the birth of this child, who was alive at 2 ..... M., on the date above stated. (Born alive or stillborn) (Hour, A. M. or P. M.)

(23) (Signature) W. R. Steady  
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife Waynesville SC

Given name added from a supplemental report  
 ..... 191.....  
 Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by Mark)  
 (27) Filed 7/10 1916 (28) W. H. Poor 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.