

## (1) PLACE OF BIRTH

County of PickensTownship of Piedmontor  
Inc. Town of .....or  
City of .....

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

6470

Registration District No. 310Registered No. 26

(For use of Local Registrar)

(No. .... St.; .... Ward)  
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)(2) Full Name of Child Edward Williford { If child is not yet named, make supplemental report as directed.

(3) BOY OR GIRL?

(4) Twin or Triplet?

(5) Number in order of birth

(6) Are Parents Married?

(7) DATE OF BIRTH Mar 14, 22  
(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Ervin Williford(9) PRESENT POSTOFFICE OF FATHER Piedmont, S.C. #4(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 32 (Years)(12) BIRTHPLACE And. Co., S.C.(13) OCCUPATION Farming(14) Number of children born to mother, including present birth 8

## MOTHER.

(14) NAME BEFORE MARRIAGE Ida Prince(15) PRESENT POSTOFFICE OF MOTHER Piedmont, S.C. #4(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 29 (Years)(18) BIRTHPLACE And. Co., S.C.(19) OCCUPATION Housewife(20) Number of children of this mother now living, including present birth 8

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 10:30 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) C. J. Foster(24) State whether Physician or Midwife (25) Address of Physician or Midwife Piedmont S.C.

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 Mar 15, 22 (28) H. W. Seawright 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.

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