

Form No. 10.
MARGIN RESERVED FOR INDEXING.
WHITE PLAINLY, WITH UNFADING 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 5.
McCurdy, of Columbia.

(1) PLACE OF BIRTH

County of Anderson
Township of Harlem
Inc. Town of
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
58609

Registration District No. 315 Registered No. 5-11
(For use of Local Registrar)

(2) Full Name of Child

Annie Ruth 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 4 (6) Are Parents Married? yes (7) DATE OF BIRTH Apr. 5 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME J. M. Williams
(9) PRESENT POSTOFFICE OF FATHER Piedmont, S.C. R#2
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 34 (Years)
(12) BIRTHPLACE Anderson Co. S.C.
(13) OCCUPATION Farmer
(20) Number of children born to mother, including present birth 4

MOTHER.

(14) NAME BEFORE MARRIAGE Annie M. Beazell
(15) PRESENT POSTOFFICE OF MOTHER Piedmont, S.C. R#2
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 31 (Years)
(18) BIRTHPLACE Anderson Co., S.C.
(19) OCCUPATION Housewife
(21) Number of children of this mother now living, including present birth 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) R. B. Day
(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Piedmont, 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 5/29/16 (28) N. L. Casey 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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