

## (1) PLACE OF BIRTH

County of Darlington

Township of .....

OR  
Inc. Town of .....OR  
City of Hartsville

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Ira Williams Jr.

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

(3) BOY OR GIRL? <u>Boy</u>	(4) Twin or Triplet? <u>No</u> To be answered only in event of Twin or Triplets	(5) Number in order of birth	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>Dec 4 1922</u> (Name of Month) (Day) (Year)
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## FATHER.

(8) FULL NAME Ira Williams

(9) PRESENT POSTOFFICE OF FATHER Hartsville S.C.

(10) COLOR OR RACE negro

(11) AGE AT LAST BIRTHDAY 44 (Years)

(12) BIRTHPLACE Greenville S.C.

(13) OCCUPATION public works

(20) Number of children born to mother, including present birth 8

## MOTHER.

(14) NAME BEFORE MARRIAGE Wilmer Scott

(15) PRESENT POSTOFFICE OF MOTHER Hartsville S.C.

(16) COLOR OR RACE negro

(17) AGE AT LAST BIRTHDAY 31 (Years)

(18) BIRTHPLACE Darlington S.C.

(19) OCCUPATION house wife

(21) Number of children of this mother now living, including present birth 5

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was alive at 7 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Sarcee sword

(24) State whether Physician or Midwife mid wife

(25) Address of Physician or Midwife Hartsville S.C.

Given name added from a supplemental report

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

(27) Filed Dec 13 22 (28) M. Hagen 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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WHITE PLAINLY, 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, &c. 1. THE OTHER, No. 2, etc., in question 5.