FORM NO. 1.

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.
Bureau of Vital Statistics
State Board of Health

File No.—For State Registrar Only
71079

(1) PLACE OF BIRTH
County of Aiken
Township of Gregg
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.)

Registration District No. 244 Registered No. 43
(For use of Local Registrar)
(No. ..... St.; ..... Ward)

(2) Full Name of Child. Lucy Williams
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
girl			yes	August 1st, 1916 (Name of Month) (Day) (Year)

To be answered only in event of Twins or Triplets

FATHER.

(8) FULL NAME Lawrence Williams
(9) PRESENT POSTOFFICE OF FATHER N. Augusta
(10) COLOR OR RACE Negro
(11) AGE AT LAST BIRTHDAY 31 (Years)
(12) BIRTHPLACE S. C.
(13) OCCUPATION farmer
(20) Number of children born to mother, including present birth 4

MOTHER.

(14) NAME BEFORE MARRIAGE Anna Bohler
(15) PRESENT POSTOFFICE OF MOTHER North Augusta
(16) COLOR OR RACE Negro
(17) AGE AT LAST BIRTHDAY 22 (Years)
(18) BIRTHPLACE South Car
(19) OCCUPATION House wife
(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 alive (Born alive or stillborn) at 7:30 A. M. (Hour A. M. or P. M.) on the date above stated.

(23) (Signature) Alice Bohler
(24) State whether Physician or Midwife midwife
(25) Address of Physician or Midwife North Augusta S.C.

Alice Bohler

Given name added from a supplemental report Alice Bohler 1916
Registrar

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

(27) Filed Aug 15 1916 (28) N. Gilliard
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.

McCaw, of Columbia
WHITE PAPER
BLANKS OR TRIPLICATE BLANKS FOR EACH CHILD, and mail
FIRST-BORN, No. 1; THIRD OFFICIAL No. 2, etc., in question 5.