

MARGIN RESERVED FOR BINDING.

WRITE 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 6.

Secy of Cal. and Cal. and Cal. S. C.

(1) PLACE OF BIRTH

County of Anderson

Township of 1

or Inc. Town of 1

or City of 1

(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

Registration District No. 3A

(No. Williams St. 1 Ward 1)

File No.—For State Registrar Only

144

Registered No. 6
(For use of Local Registrar)

(2) Full Name of Child

She May Williams

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

(3) BOY OR GIRL
girl

(4) Twin or Triplet?
To be answered only in case of Twins or Triplets

(5) Number in order of birth
1st

(6) Are Parents Married?
Yes

(7) DATE OF BIRTH
June 6 1912
(Name of Month) (Day) (Year)

FATHER

(8) FULL NAME George Rigg

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

(10) COLOR OR RACE col. (11) AGE AT LAST BIRTHDAY 2 (Years)

(12) BIRTHPLACE Anderson S.C.

(13) OCCUPATION Farmer

(20) Number of children born to mother, including present birth 1

MOTHER

(14) NAME BEFORE MARRIAGE Bulah Williams

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

(16) COLOR OR RACE col. (17) AGE AT LAST BIRTHDAY 18 (Years)

(18) BIRTHPLACE Anderson S.C.

(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 born at 7:15 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Dr. J. H. Williams

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

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

(27) Filed (28) 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.

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.