

WRITE PLAINLY, WITH UNFAMING, INK, IN A PERMANENT INK, IN THE FIRST-BORN, No. 1, THE OTHER, No. 2, etc. In question 2, State of Georgia, Columbia, S. C.

(1) PLACE OF BIRTH

County of Georgetown  
Township of St. Y.  
Inc. Town of Anaximus SC  
City of .....

CERTIFICATE OF BIRTH  
STATE OF SOUTH CAROLINA  
Bureau of Vital Statistics  
State Board of Health

No. 40414  
—For State Registrar Only

Registration District No. 91.03 Registered No. 142  
(For use of Local Registrar)

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

(2) Full Name of Child James William

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

(3) BOY OR GIRL Male (4) Twin or Triplet No (5) Number in order of birth 1 (6) Are Parents Married Yes (7) DATE OF BIRTH Dec 1 1923  
(Name of Month) (Day) (Year)

FATHER

(8) FULL NAME James William  
(9) PRESENT POSTOFFICE OF FATHER Andrews SC  
(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 41  
(12) BIRTHPLACE Williamsburg Co SC  
(13) OCCUPATION Farmer  
(14) Number of children born to mother, including present birth 8

MOTHER

(14) NAME BEFORE MARRIAGE Hester Thomas  
(15) PRESENT POSTOFFICE OF MOTHER Andrews SC  
(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 38  
(18) BIRTHPLACE Georgetown Co SC  
(19) OCCUPATION Farmer  
(20) Number of children of this mother now living, including present birth 8

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(21) I hereby certify that I attended the birth of this child, who was born alive at 8 9 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(22) (Signature) James Williams  
(23) State whether Physician or Midwife Physician (24) Address of Physician or Midwife Andrews SC

Given name added from a supplemental report

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

(26) Filed Dec 19 1923 (27) Registrar W. B. Baskin

\*When there was no attending physician or midwife, then the father, householder, etc., must not be reported as stillborn. No report before the fifth month of pregnancy.