

Form No. 1

(1) PLACE OF BIRTH

County of Berkeley
 Township of St. Stephens
 or
 Inc. Town of
 or
 City of (No. St.; Ward)

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

41099

Registration District No. 703 Registered No. 143
 (For use of Local Registrar)

(2) Full Name of Child Joe Williams (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL B (4) Twin or Triplet? To be answered only in event of Twins or Triplets (5) Number in order of birth (6) Are Parents Married? yes (7) DATE OF BIRTH Dec 31, 1922
 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Jessie Williams
 (9) PRESENT POSTOFFICE OF FATHER Pineville
 (10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 34
 (Years)
 (12) BIRTHPLACE Pineville
 (13) OCCUPATION Farming
 (20) Number of children born to mother, including present birth 6

MOTHER.

(14) NAME BEFORE MARRIAGE Wifry Williams
 (15) PRESENT POSTOFFICE OF MOTHER Pineville
 (16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 34
 (Years)
 (18) BIRTHPLACE Pineville
 (19) OCCUPATION Housewife
 (21) Number of children of this mother now living, including present birth 6

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) Satira McCray

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Midwife Pineville

Given name added from a supplemental report

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

(27) Filed Jan 1, 1923 (28) W. A. Gess 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.

MARGIN RESERVED FOR BINDING.
 WRITE PLAINLY, WITH UNFADING INK—WHEN IN A PERMANENT RECORD.
 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.

RECEIVED OF COLUMBIA: COLUMBIA, S. C.