

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 5.

Form No. 3

(1) PLACE OF BIRTH

County of

Township of

or
Inc. Town of

or
City of

Dorchester.

Burges.

Ridgewill

(No.)

(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. *1700*

File No.—For State Registrar Only

34160

Registered No. *63*
(For use of Local Registrar)

(2) Full Name of Child

Luma Bell Williams

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

(3) SEX

Girl

(4) Twin or Triplet?

No

(5) Number in order of birth

1

(6) Are Parents Married?

Yes

(7) DATE OF BIRTH

Sept 27 22

(8) FULL NAME

Jesley Williams

(9) PRESENT POSTOFFICE OF FATHER

Ridgewill

(10) COLOR OR RACE

Negro

(11) AGE AT LAST BIRTHDAY

23

(12) BIRTHPLACE

S. C. Ar.

(13) OCCUPATION

Farmer

MOTHER.

(14) NAME BEFORE MARRIAGE

Freney Daniels

(15) PRESENT POSTOFFICE OF MOTHER

Ridgewill

(16) COLOR OR RACE

Negro

(17) AGE AT LAST BIRTHDAY

22

(18) BIRTHPLACE

S. C. Ar.

(19) OCCUPATION

Domestic

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

1

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

1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was

alive

72 M.

on the date above stated.

(Born alive or stillborn)

(Mark A. M. or P. M.)

(23) (Signature)

Louvenia Clark

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Ridgewill, S. C.

Given name added from a supplemental report

(26) Witness

(Signature of Witness necessary only when question 23 is signed "stillborn")

(27) Filed

Oct 10 22

St. J. Johnston

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.