

MARGIN RESERVED FOR BINDING.  
WRITE PLAINLY, WITH UNFADING INK.—THIS IS A PERMANENT RECORD, and mark the  
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.

(1) PLACE OF BIRTH

County of Flournoe  
Township of Taus. Bury  
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.)

(2) Full Name of Child

Louvenia Williams

File No.—For State Registrar Only

85657

Registration District No. 2014

Registered No. 70  
(For use of Local Registrar)

(3) BOY OR GIRL <u>Girl</u>	(4) Twin or Triplet? To be answered only in case of Twins or Triplets	(5) Number in order of birth	(6) Sex <u>yes</u> Female	(7) DATE OF BIRTH <u>Nov 9</u> , 19 <u>16</u> (Name of Month) (Day) (Year)
FATHER.			MOTHER.	
(8) FULL NAME <u>Elyah Williams</u>			(14) NAME BEFORE MARRIAGE <u>Jessie Lee</u>	
(9) PRESENT POSTOFFICE OF FATHER <u>Effingham SC.</u>			(15) PRESENT POSTOFFICE OF MOTHER	
(10) COLOR OR RACE <u>Negro</u>	(11) AGE AT LAST BIRTHDAY <u>22</u>	(17) AGE AT LAST BIRTHDAY <u>20</u> (Years)		
(12) BIRTHPLACE <u>S.C.</u>	(18) BIRTHPLACE <u>S.C.</u>			
(13) OCCUPATION <u>Farmer</u>	(19) OCCUPATION			
(20) Number of children born to mother, including present birth <u>1</u>			(21) Number of children of this mother now living, including present birth <u>1</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was born at 9 P. M.,  
(born alive or stillborn) (Hour A. M. or P. M.)  
Esther Gordon  
(23) (Signature)  
(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 Nov 20 1916 (28) DC Weil 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.