

## (1) PLACE OF BIRTH

County of Granville  
 Township of Amherst  
 or  
 Inc. Town of .....  
 or  
 City of .....

## CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

2231

Registration District No. 3618Registered No. 2  
(For use of Local Registrar)

(No. .... St.; .... Ward)  
 If birth occurs in a hospital or other institution, give name of same instead of street and number.

(2) Full Name of Child Victoria Johnson

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

(3) BOY OR GIRL girl (4) Twin or Triplet? ..... (5) Number in order of birth ..... (6) Are Parents Married? yes (7) DATE OF BIRTH Jan. 16, 1927  
 To be answered only in event of Twins or Triplets (Name) (Month) (Day) (Year)

## FATHER.

(8) FULL NAME Willie Johnson  
 (9) PRESENT POSTOFFICE OF FATHER Union St  
 (10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY 25  
 (12) BIRTHPLACE St  
 (13) OCCUPATION Farm  
 (20) Number of children born to mother, including present birth 1

## MOTHER.

(14) NAME BEFORE MARRIAGE Elizabeth Russell  
 (15) PRESENT POSTOFFICE OF MOTHER Parker St  
 (16) COLOR OR RACE Black (17) AGE AT LAST BIRTHDAY 24  
 (18) BIRTHPLACE St  
 (19) OCCUPATION Housewife  
 (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 Born alive at 2 P. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Willie Johnson  
 (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Parker St

Given name added from a supplemental report

(26) Witness A. C. Dantles  
 (Signature of Witness necessary only when question 25 is signed by mark)

(27) Filed Jan 17, 1927 (28) W. A. Dantles 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.

NOTE: In case of stillbirth, No. 1, this certificate No. 2, etc. in question 2.