

(1) PLACE OF BIRTH

County of

Township of

or
Inc. Town of

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

(3) BOY OR
GIRL?(4) Twin
or Triplet?(5) Number in
order of birth
To be answered only in case of Twins or Triplets(6) Are
Parents
Married?(7) DATE OF
BIRTH Aug. 10 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL
NAME Mack Snige Johnson(9) PRESENT
POSTOFFICE
OF FATHER Campbello SC.(10) COLOR
OR
RACE White (11) AGE AT LAST
BIRTHDAY 41 (Years)(12) BIRTHPLACE Spaulding(13) OCCUPATION Farmer(14) Number of children born to
mother, including present birth 8

MOTHER.

(14) NAME BEFORE
MARRIAGE Marie Laura Hornon(15) PRESENT
POSTOFFICE
OF MOTHER Campbello(16) COLOR
OR
RACE White (17) AGE AT LAST
BIRTHDAY 33 (Years)(18) BIRTHPLACE Union S C(19) OCCUPATION Domestic(21) Number of children of this mother
now living, including present birth 7

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 7:30 am M.,
on the date above stated. Cl. Stearns (Both alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemen-
tal report

(26) Witness

(Signature of Witness necessary only
when question 23 is signed by mark)(27) Filed Aug. 11 1916

(28)

C. L. Mackay
Local RegistrarWhen 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.

fifth month of pregnancy.

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No. — For State Registrar Only

74725

Registration District No. 4001-aRegistered No. 57

(For use of Local Registrar)

St.; Ward)

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

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