

Form No. 1
 WITH UPDATING INC.—THIS IS 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.
 DEPARTMENT OF COLUmbIA, Columbia, S. C.

Form No. 1

(1) PLACE OF BIRTH

County of Z. anfield.
 Township of
 or
 Inc. Town of No. 2
 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
34279

Registration District No. 1991 Registered No. 58
 (For use of Local Registrar)

(2) Full Name of Child Oliver Johnson (if child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Sept-25-22
 (Name of Month) (Day) (Year)

FATHER.		MOTHER.	
(8) FULL NAME <u>Samuel Johnson</u>	(14) NAME BEFORE MARRIAGE <u>Maggie Davis</u>	(15) PRESENT POSTOFFICE OF FATHER <u>Woodward</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Woodward</u>
(9) PRESENT POSTOFFICE OF FATHER <u>Woodward</u>	(16) COLOR OR RACE <u>Black</u>	(16) COLOR OR RACE <u>Black</u>	(17) AGE AT LAST BIRTHDAY <u>29</u>
(10) COLOR OR RACE <u>Black</u>	(11) AGE AT LAST BIRTHDAY <u>38</u>	(18) BIRTHPLACE <u>S.C.</u>	(18) BIRTHPLACE <u>S.C.</u>
(12) BIRTHPLACE <u>S.C.</u>	(13) OCCUPATION <u>Farmer</u>	(19) OCCUPATION <u>Farmer work</u>	(21) Number of children of this mother now living, including present birth <u>9</u>
(20) Number of children born to mother, including present birth <u>12</u>			

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Oliver at 5 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Saida Foster Cal
 (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Woodward

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
 (27) Filed Oct-12-22 (28) W. G. Blaine 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.