

MAKING RESERVED FOR BINDING.
 THESE PLANTS, WITH CERTAIN INSTRUCTIONS, ARE A PERMANENT RECORD.
 IN CASE OF TWIN OR TRIPLETS USE A SEPARATE BLANK FOR EACH CHILD, AND MAKE THE
 FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 4.

(1) PLACE OF BIRTH

County of chester
 Township of Bluefield
 or
 Inc. Town of.....
 or
 City of.....

CERTIFICATE OF BIRTH

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

No. 3361—For State Registrar Only

Registration District No. 1101 Registered No. 10
 (For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Luzie Geneva Johnson If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL girl (4) Twin or Triplet To be answered only in case of Twin or Triplet (5) Age of Mother 28 (6) DATE OF BIRTH Feb. 15, 1923 (Month of Birth) (Day) (Year)

FATHER.		MOTHER.	
(8) FULL NAME <u>James Johnson</u>	(14) NAME BEFORE MARRIAGE <u>Sarah Hinds</u>	(9) PRESENT POSTOFFICE OF FATHER <u>Bluefield, W. Va.</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Bluefield, W. Va.</u>
(10) COLOR OR RACE <u>white</u>	(11) AGE AT LAST BIRTHDAY <u>40</u> (Year)	(16) COLOR OR RACE <u>white</u>	(17) AGE AT LAST BIRTHDAY <u>28</u> (Year)
(12) BIRTHPLACE <u>W. Va.</u>	(18) OCCUPATION <u>farmer</u>	(19) BIRTHPLACE <u>W. Va.</u>	(20) OCCUPATION <u>farmer</u>
(21) Number of children born to mother, including present birth <u>1</u>	(22) Number of children of this mother now living, including present birth <u>1</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(23) I hereby certify that I attended the birth of this child, who was.....
 on the date above stated. (Born alive or stillborn) (Sex M. or F. M.)

(24) (Signature) [Signature] (25) State whether Physician or Midwife Physician (26) Address of Physician or Midwife Bluefield, W. Va.

Given name added from a supplemental report.....
 (27) Witness (Signature of Witness necessary only when question 23 is signed by mark) [Signature]
 (28) Filed 3-5-23 (29) Local Registrar [Signature]

When there was no attending physician or midwife, then the father, householder, etc., should make this report. If a child breathes even once, it must not be reported as stillborn. No report is desired of a pregnancy before the fifth month of pregnancy.