

MARGIN RESERVED FOR BINDING.  
WHITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.  
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 Richland  
Township of Kanawha  
or  
Inc. Town of.....  
or  
City of..... (No. .... St.; ..... Ward)  
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

**CERTIFICATE OF BIRTH**  
STATE OF SOUTH CAROLINA  
Bureau of Vital Statistics  
State Board of Health

Registration District No. 3803 Registered No. 237  
(For use of Local Registrar)

**(2) Full Name of Child** Johnson Goodson (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 Dec 21 22  
(Name of Month) (Day) (Year)

**FATHER**  
(8) FULL NAME Trakalean Goodson  
(9) PRESENT POSTOFFICE OF FATHER Shobkins P.C.  
(10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 28  
(Years)  
(12) BIRTHPLACE P.C.  
(13) OCCUPATION farmer  
(20) Number of children born to mother, including present birth 2

**MOTHER**  
(14) NAME BEFORE MARRIAGE Edna Randolph  
(15) PRESENT POSTOFFICE OF MOTHER Shobkins P.C.  
(16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 25  
(Years)  
(18) BIRTHPLACE P.C.  
(19) OCCUPATION  
(21) Number of children of this mother now living, including present birth 2

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE**  
(22) I hereby certify that I attended the birth of this child, who was born at 6 P.M.  
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)  
(23) (Signature) Edna V. Randolph  
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Shobkins P.C.

Given name added from a supplemental report  
(26) Witness Mrs. J. M. Goodson  
(Signature of Witness necessary only when question 23 is signed by mark)  
(27) Filed 30 19 22 (28) Mrs. J. M. Goodson 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.