

MARGIN RESERVED FOR BINDING.

WRITE PLAINLY, WITH ENFOLDING INC.—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 8.

DEPARTMENT OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH  
County of Abbeville  
Township of Mayfield  
or  
Inc. Town of .....  
or  
City of .....  
(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. 109 Registered No. 84  
(For use of Local Registrar)

(No. .... St.; .... Ward)

File No.—For State Registrar Only  
**28471**

(2) Full Name of Child Johnis Garden Burris (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 5-22  
(Name of Month) (Day) (Year)

FATHER.  
(8) FULL NAME Johnis Wilburn Burris  
(9) PRESENT POSTOFFICE OF FATHER Cochran Falls S.C.  
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 26  
(Years)  
(12) BIRTHPLACE Abbeville Co. S.C.  
(13) OCCUPATION Farmer  
(20) Number of children born to mother, including present birth Three

MOTHER.  
(14) NAME BEFORE MARRIAGE Mary J. Sutherland  
(15) PRESENT POSTOFFICE OF MOTHER Cochran Falls S.C.  
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 27  
(Years)  
(18) BIRTHPLACE Abbeville Co. S.C.  
(19) OCCUPATION House wife  
(21) Number of children of this mother now living, including present birth Three

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.  
(22) I hereby certify that I attended the birth of this child, who was Alive at 11:30 M.  
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. W. Tate, M.D.  
(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Cochran Falls S.C.

Given name added from a supplemental report  
(26) Witness Johnis Garden Burris  
(Signature of Witness necessary only when question 23 is signed by mark)  
(27) Filed Oct. 9 1922 (28) J. H. Pence  
Registrar 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.