

MADE OF COLUMBIA, COLUMBIA, S. C.

IN CASE OF TWINS OR TRIPLETS, 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 Anderson  
Township of Chapel  
OR  
Inc. Town of Irva S.P.  
OR  
City of .....

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only  
**40826**

Registration District No. 304 Registered No. 125  
(For use of Local Registrar)

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

(2) Full Name of Child W. H. Harrison

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

(3) BOY OR GIRL Boy (4) Twin or Triplet? ✓ (5) Number in order of birth ✓ (6) Are Parents Married? Yes (7) DATE OF BIRTH Jan 25, 1930  
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME J. Harrison Johnson  
(9) PRESENT POSTOFFICE OF FATHER Irva S.C.  
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 35  
(Years)  
(12) BIRTHPLACE Franklin Co Ga  
(13) OCCUPATION Textile  
(20) Number of children born to mother, including present birth 8

MOTHER.

(14) NAME BEFORE MARRIAGE Ann Lee Compton  
(15) PRESENT POSTOFFICE OF MOTHER Irva S.C.  
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 33  
(Years)  
(18) BIRTHPLACE Franklin Co Ga  
(19) OCCUPATION Home wife  
(21) Number of children of this mother now living, including present birth 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

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

(23) (Signature) D. B. ...  
(24) State whether Physician or Midwife (25) Address of Physician or Midwife Irva S.C.

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed Dec 20 1930 (28) J. W. McAdams 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.