

## (1) PLACE OF BIRTH

County of AndersonTownship of Anderson

Inc. Town of.....

City of Anderson

(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. 3A

No. for State Registrar

19742

Registered No. 226  
(For use of Local Registrar)(2) Full Name of Child Johnnie Irene Wells

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

3) BOY OR GIRL? <u>GIRL</u>	4) Twin or Triplet? To be entered only in case of Twin or Triplet	5) Number in order of birth <u>1</u>	6) Age Parents Married <u>15</u>	7) DATE OF BIRTH <u>July 7, 1923</u> (Month) (Day) (Year)
FATHER			MOTHER	
8) FULL NAME <u>Charlie Wells</u>			14) NAME BEFORE MARRIAGE <u>Johnnie Blair</u>	
9) PRESENT POSTOFFICE OF FATHER <u>Anderson</u>			15) PRESENT POSTOFFICE OF MOTHER <u>Anderson</u>	
10) COLOR OR RACE <u>W</u>	11) AGE AT LAST BIRTHDAY <u>3.16</u> (Years)	16) COLOR OR RACE <u>W</u>	17) AGE AT LAST BIRTHDAY <u>17</u> (Years)	
12) BIRTHPLACE <u>And. S.C.</u>			18) BIRTHPLACE <u>Alconne S.C.</u>	
13) OCCUPATION <u>Textile</u>			19) OCCUPATION <u>Housewife</u>	
20) Number of children born to mother, including present birth <u>1</u>			21) Number of children of this mother now living, including present birth <u>1</u>	

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born on the date above stated.At 2:30 P.M. (Normally or stillborn) (Hour) (M. or P.)(23) (Signature) J. H. Anderson

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife  
Anderson 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

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F. B. CRAYTON,

Registrar

When there was no attending physician or midwife, then the father, householder, etc., 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.

Filed 2/21, 1931Julia McClellan  
Registrar