

WHITE PLAINS, WITH LEADING ENDS—THIS IS A PERMANENT RECORD
N. B.—In case of TWINS OR TRIPLETS use a SEPARATE INK FOR EACH CHILD, and mark the
PRINT-BOIN. NO. 1 THE OTHER NO. 2, etc. In question 5
McCAW OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Porterburg
Township of 185
or
Inc. Town of.....
or
City of.....

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

20134

Registration District No. 40006 Registered No. 62
(For use of Local Registrar)

(2) Full Name of Child

Agree Wilene Johnson

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

3 BOY OR GIRL? <u>Girl</u>	4 Twin or Triplet? <u>No</u>	5 Number in order of birth <u>1</u>	6 Are Parents Married? <u>yes</u>	7 DATE OF BIRTH <u>June 30 1922</u> (Month) (Day) (Year)
FATHER.		MOTHER.		
8 FULL NAME <u>A. J. Johnson</u>	14 NAME BEFORE MARRIAGE <u>James Hobbs</u>			
9 PRESENT POSTOFFICE OF FATHER <u>Wilkesboro</u>	15 PRESENT POSTOFFICE OF MOTHER <u>James</u>			
10 COLOR OR RACE <u>White</u>	11 AGE AT LAST BIRTHDAY <u>48</u> (Years)	16 COLOR OR RACE <u>White</u>	17 AGE AT LAST BIRTHDAY <u>40</u> (Years)	
12 BIRTHPLACE <u>Illinois</u>	18 BIRTHPLACE <u>Illinois</u>			
13 OCCUPATION <u>Teacher</u>	19 OCCUPATION <u>Domestic</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.....at.....M.,
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) M. J. Moore
(24) State whether Physician or Midwife (25) Address of Physician or Midwife Wilkesboro

Given name added from a supplemental report.....
.....19.....
Registrar
(26) Witness.....
(Signature of Witness necessary only when question 23 is signed by mother)
(27) Filed T. J. Moore 19 22 (28) J. C. Moore 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.

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