

## (1) PLACE OF BIRTH

County of ChesterTownship of Serrisvilleor  
Inc. Town of Rodman S.C.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

File No.—For State Registrar Only

41586

Registration District No. 1106Registered No. 135

(For use of Local Registrar)

(2) Full Name of Child Sallie Kirk Johnson

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

(1) BOY OR GIRL? <u>girl</u>	(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parents Married? <u>W</u>	(7) DATE OF BIRTH <u>Dec. 3, 1922</u>
To be answered only in event of Twins or Triplets			(Name of Month) (Day) (Year)	

## FATHER.

(7) FULL NAME Kirkcoush Johnson(9) PRESENT POSTOFFICE OF FATHER Spartanburg S.C.(10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 14 (Years)(12) BIRTHPLACE S.C.

(13) OCCUPATION

## MOTHER.

(14) NAME BEFORE MARRIAGE Ruthie D. Kirk(15) PRESENT POSTOFFICE OF MOTHER Rodman S.C.(16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 14 (Years)(18) BIRTHPLACE Chester County(19) OCCUPATION Farming

(20) Number of children born to mother, including present birth { ..... 1 .....

(21) Number of children of this mother now living, including present birth { ..... 1 .....

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 10:20 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Emma Woods

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Midwife Rodman S.C.

Given name added from a supplemental report

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Registrar.

(26) Witness

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

(27) Filed Jan 7 1923 (28) J. B. Hollis 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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