

MARGIN RESERVED FOR BINDING.
 WRITE PLAINLY, 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.

BECAUSE OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

County of Pickens
 Township of Dacusville
 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

23557

Registration District No. 3701

Registered No. 36
 (For use of Local Registrar)

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

(2) Full Name of Child Lucile Johnson

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

(3) BOY OR GIRL Girl (4) Twin or Triplet? (5) Number in order of birth (6) Yes (7) DATE OF BIRTH June 18 22
 To be answered only in event of Twins or Triplets (Month) (Day) (Year)

FATHER.

(8) FULL NAME John Johnson
 (9) PRESENT POSTOFFICE OF FATHER Dacusville
 (10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 42
 (12) BIRTHPLACE Pickens Co.
 (13) OCCUPATION Farming

MOTHER.

(14) NAME BEFORE MARRIAGE Samantha Maxwell
 (15) PRESENT POSTOFFICE OF MOTHER Dacusville
 (16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 38
 (18) BIRTHPLACE Pickens Co.
 (19) OCCUPATION Domestic

(20) Number of children born to mother, including present birth 11

(21) Number of children of this mother now living, including present birth 10

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) Rebecca Turner

(24) State whether Physician or Midwife Midwife

(25) Address of Physician or Midwife Dacusville

Given name added from a supplemental report

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

(27) Filed Aug 10 1922 (28) H. M. Jones
 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.