

(1) PLACE OF BIRTH

County of OrangeburgTownship of Whitton

Inc. Town of

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

18756

Registration District No. 3616 Registered No. 31
(For use of Local Registrar)(2) Full Name of Child William Augustus Johnson(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth 3 (6) Are Parents Married? Yes (7) DATE OF BIRTH June 23
(Date of Month) (Day) (Year)

FATHER.

(8) FULL NAME Barry Johnson(9) PRESENT POSTOFFICE OF FATHER Cope SC R 7d(10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 30
(Years)(12) BIRTHPLACE Orangeburg Co(13) OCCUPATION Farming(20) Number of children born to mother, including present birth Five

MOTHER.

(14) NAME BEFORE MARRIAGE Barry Buckley(15) PRESENT POSTOFFICE OF MOTHER Cope SC R 7d(16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 30
(Years)(18) BIRTHPLACE Orangeburg Co(19) OCCUPATION Housewife(21) Number of children of this mother now living, including present birth Four

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Alive at 9.9 M.,
on the date above stated. (Born alive or stillborn. Hour A. M. or P. M.)
E. L. Williams

(23) (Signature)

(24) State whether, Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

(26) Witness

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

(27) Filed

June 28, 1923

(28)

R. K. Cunnery

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.