

(1) PLACE OF BIRTH

County of CalhounTownship of Buckleyor
Inc. Town ofor
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
84552Registration District No. 800 Registered No. 153
(For use of Local Registrar)(2) Full Name of Child Joe Johnson Jr. If child is not yet named, make supplemental report as directed.(3) BOY OR GIRL? Boy (4) Twin or Triplet? No (5) Number in order of birth 1st (6) Are Parents Married? Yes (7) DATE OF BIRTH Nov 12 1906
(Name of Month) (Day) (Year)(8) FULL NAME Joe Johnson(9) PRESENT POSTOFFICE OF FATHER 21 Mount(10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 40 (Years)(12) BIRTHPLACE SC(13) OCCUPATION Home Saver(20) Number of children born to mother, including present birth 1-8(14) NAME BEFORE MARRIAGE Christiana Sims(15) PRESENT POSTOFFICE OF MOTHER 21 Mount(16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 38 (Years)(18) BIRTHPLACE SC(19) OCCUPATION Home Saver(21) Number of children of this mother now living, including present birth 1-14

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 9:20 a. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Elyseph Green Midwife

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

Given name added from a supplemental report

(26) Witness At Miller (Signature of Witness necessary only when question 23 is signed by mark)(27) Filed Dec 5, 1916 (28) At Miller Local Registrar

When there was no attending physician or midwife, then the father, householder, etc., should make this return. If a child has been born, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.

WHEN FATHERS WITH TWINS OR TRIPLETS USE A SEPARATE BLANK FOR EACH CHILD, AND MARK THE FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 8.

State of Columbia