

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.

File No.—For State Registrar Only
48323

(1) PLACE OF BIRTH
County of Charleston S.C. STATE OF SOUTH CAROLINA.
Bureau of Vital Statistics
State Board of Health
Township of
or
Inc. Town of Registration District No. 9A Registered No. 191
(For use of Local Registrar)
or
City of Charleston S.C. (No. St.; Ward)
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)
(2) Full Name of Child Dorothy Johnson { If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL <u>Girl</u>	(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>Feb 20</u> (Name of Month) (Day) (Year)
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FATHER.

(8) FULL NAME <u>William Johnson</u>	(14) NAME BEFORE MARRIAGE <u>Florence Parker</u>
(9) PRESENT POSTOFFICE OF FATHER <u>Charleston S.C.</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Charleston S.C.</u>
(10) COLOR OR RACE <u>Colored</u> (11) AGE AT LAST BIRTHDAY <u>94</u> (Years)	(16) COLOR OR RACE <u>Colored</u> (17) AGE AT LAST BIRTHDAY <u>21</u> (Years)
(12) BIRTHPLACE <u>Eddisto S.C.</u>	(18) BIRTHPLACE <u>Eddisto S.C.</u>
(13) OCCUPATION <u>Householder</u>	(19) OCCUPATION <u>Housekeeper</u>
(20) Number of children born to mother, including present birth { <u>Four</u> }	(21) Number of children of this mother now living, including present birth { <u>Four</u> }

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 4:20 am on the date above stated.
(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Elysa J. Fuller
(24) State whether Physician or Midwife (25) Address of Physician or Midwife
midwife 71 Corning St.

Given name added from a supplemental report
....., 191....
.....
Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
W. J. Green
(27) Filed 7/21 191.... (28) J. M. Green Local Registrar

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

McCaw, of Columbia