

WHICH PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
M. N.H.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the
McCaw McCraw, of Columbia FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

CERTIFICATE OF BIRTH
STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of Health

File No. — For State Registrar Only
64782

(1) PLACE OF BIRTH
County of Horry
Township of Conway
OR
Inc. Town of
OR
City of
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)
Registration District No. 2502 Registered No. 77
(For use of Local Registrar)

(2) Full Name of Child Lessley Johnson
If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? <u>Boy</u>	(4) Twin or Triplet?	(5) Number in order of birth <i>To be answered only in case of Twins or Triplets</i>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>June 5 1916</u> <i>(Name of Month) (Day) (Year)</i>
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FATHER.

(8) FULL NAME Fred Johnson

(9) PRESENT POSTOFFICE OF FATHER Conway

(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 35 (Years)

(12) BIRTHPLACE Sc

(13) OCCUPATION Farming

(20) Number of children born to mother, including present birth 7

MOTHER.

(14) NAME BEFORE MARRIAGE Emma Nelson

(15) PRESENT POSTOFFICE OF MOTHER Conway

(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 33 (Years)

(18) BIRTHPLACE Sc

(19) OCCUPATION Housework

(21) Number of children of this mother now living, including present birth 7

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born alive at 11 a M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. A. Weston

(24) State whether Physician or Midwife | (25) Address of Physician or Midwife
Physician | Conway, Sc

Given name added from a supplemental report

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

(27) Filed June 14 1916 (28) J. D. Rogers 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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