

## (1) PLACE OF BIRTH

County of GreenwoodTownship of Hodgesor  
Inc. Town of .....or  
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  
64658Registration District No. 2307Registered No. 32  
(For use of Local Registrar)(2) Full Name of Child Yarnsha Velay Johnston

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

(3) BOY OR GIRL?

Girl

(4) Twin or Triplet?

4

(5) Number in order of birth

4

(6) Are Parents Married?

yes

(7) DATE OF BIRTH

April 17

(Name of Month)

(Day)

(Year)

## FATHER.

(5) FULL NAME

Richard Johnston

(6) PRESENT POSTOFFICE OF FATHER

Hodges, S.C.

(7) COLOR OR RACE

Black

(8) AGE AT LAST BIRTHDAY

27

(Years)

(9) BIRTHPLACE

Greenwood, Co. S.C.

(10) OCCUPATION

Farming

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

2

## MOTHER.

(12) NAME BEFORE MARRIAGE

Essie Wins

(13) PRESENT POSTOFFICE OF MOTHER

Hodges, S.C.

(14) COLOR OR RACE

Black

(15) AGE AT LAST BIRTHDAY

22

(Years)

(16) BIRTHPLACE

Abbeville Co. S.C.

(17) OCCUPATION

Housewife

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

2

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was alive at 3 A.M. on the date above stated.  
(Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Martha Brister

(24) State whether Physician or Midwife

Midwife

(25) Address of Physician or Midwife

Abbeville S.C.

Given name added from a supplemental report

(26) Witness

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

(27) Filed June 27, 1914(28) S. I. Brissie

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.