

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.
 McCaw of Columbia, S. C.

(1) PLACE OF BIRTH

CERTIFICATE OF BIRTH

File No.—For State Registrar Only
90363

County of Greenville
 Township of Bluffton
 or
 Inc. Town of.....
 or
 City of..... (No. St.; Ward)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

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

Registration District No. 2505 Registered No. 88
 (For use of Local Registrar)

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

(3) BOY OR GIRL Boy (4) Twin or Triplet? _____ (5) Number in order of birth 1 (6) Are Parents Married? yes (7) DATE OF BIRTH Dec 17 1916
 (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME Walter Johnson
 (9) PRESENT POSTOFFICE OF FATHER Bluffton S.C.
 (10) COLOR OR RACE White
 (11) AGE AT LAST BIRTHDAY 27 (Years)
 (12) BIRTHPLACE Greenville S.C.
 (13) OCCUPATION Farmer
 (20) Number of children born to mother, including present birth 4

MOTHER.
 (14) NAME BEFORE MARRIAGE Eva Page
 (15) PRESENT POSTOFFICE OF MOTHER Bluffton S.C.
 (16) COLOR OR RACE White
 (17) AGE AT LAST BIRTHDAY 27 (Years)
 (18) BIRTHPLACE Greenville S.C.
 (19) OCCUPATION House wife
 (21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Born alive at 6 P. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) [Signature]
 (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Bluffton S.C.

Given name added from a supplemental report

 _____, 19 _____
 Registrar

(26) Witness _____ (Signature of Witness necessary only when question 23 is signed by mark)
 (27) Filed Dec 20 1916 (28) [Signature] 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.