

ARTIST/INFORMANT DATA SHEET

NAME *Joseph F. Johns "Cayana"*

ORGANIZATION/GROUP NAME

SEX *M*

ADDRESS AND PHONE *7 Russell St
W Peabody, MA 01960 978-535-2426*

COUNTY

BIRTHDATE
BIRTHPLACE

CATEGORY OF ARTIST *wood-carver, shaman*

GENRE/CATEGORY OF PRODUCT

ETHNIC BACKGROUND *Creek & Sicks*

TRADITION BASE
ETHNIC
URBAN
OTHER
RELIGION
OCCUPATION

PRIMARY LANGUAGE *English*

RELIGIOUS AFFILIATION

OCCUPATIONS

ORGANIZATIONAL AFFILIATIONS

FIELDWORKER: *Laurie K. Sommers, S. Georgia Folklife Project*

DATE:

LOCATION:

COMMENTS: