

(1) PLACE OF BIRTH

County of

Township of

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.)

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

91863

Registration District No. 4005 Registered No. 106

(For use of Local Registrar)

(2) Full Name of Child Matthew Miller

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

(3) BOY OR GIRL?

Boy

(4) Twin or Triplet?

No

(5) Number in order of birth

1

(6) Are Parents Married?

Yes

(7) DATE OF BIRTH

Dec 21

1916

(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME

Jerman Miller

(9) PRESENT POSTOFFICE OF FATHER

Paulina T

(10) COLOR OR RACE

Black

(11) AGE AT LAST BIRTHDAY

38

(Years)

(12) BIRTHPLACE

N.C.

(13) OCCUPATION

Farmer

## MOTHER.

(14) NAME BEFORE MARRIAGE

Be sin Miller

(15) PRESENT POSTOFFICE OF MOTHER

Paulina T

(16) COLOR OR RACE

Black

(17) AGE AT LAST BIRTHDAY

21

(Years)

(18) BIRTHPLACE

N.C.

(19) OCCUPATION

Domestic

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

3

(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 or stillborn on the date above stated.

(23) (Signature)

D. H. Smith M.D.

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Phys - Glenn Springs

Given name added from a supplemental report

191...

Registrar

(26) Witness

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

(27) Filed Dec 21 1916 (28) J. C. White

Local Registrar

\*When there was no attending physician or midwife, then the father, household, 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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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.

McGraw-Hill