

MARGIN RESERVED FOR BINDING.
 WHITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD
 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

(1) PLACE OF BIRTH

County of Florence
 Township of Matto
 or
 Inc. Town of

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

File No.—For State Registrar Only
85636

Registration District No. 4012 Registered No. 76
 (For use of Local Registrar.)
 St.; (Ward)
 (No.) (Name of Street and Number.)

(2) Full Name of Child

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

(3) BOY OR GIRL? Girl (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? (7) DATE OF BIRTH Nov. 26, 1916
 (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME Joshua Miles
 (9) PRESENT POSTOFFICE OF FATHER Lake City # 1
 (10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 37 (Years)
 (12) BIRTHPLACE Lake City - SC # 1
 (13) OCCUPATION Farming
 (20) Number of children born to mother, including present birth 8

MOTHER.
 (14) NAME BEFORE MARRIAGE Nancy A Miles
 (15) PRESENT POSTOFFICE OF MOTHER Lake City - SC # 1
 (16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 34 (Years)
 (18) BIRTHPLACE Cordova SC
 (19) OCCUPATION Domestic work
 (21) Number of children of this mother now living, including present birth 6

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was ... born alive at ... 1:30 a.m., (Hour A. M. or P. M.)
 on the date above stated.

(23) (Signature) Martha Darrell (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

(26) Witness Joshua Miles (Signature of witness necessary only when question 23 is signed by mark)
 (27) Dated Nov 26 1916 (28) A. E. Kelly Local Registrar

*When there was no attending physician or midwife, then the father, householder, etc., should make this return. If a child breathes ever once, it must not be reported as stillborn. No report is desired of stillbirths before the third month of pregnancy.

STATE OF SOUTH CAROLINA, COLUMBIA, S. C.