

## (1) PLACE OF BIRTH

County of Greenville

Township of .....

or  
Inc. Town of .....or  
City of Greenville, S. C.

(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

42589

Registration District No. 22ARegistered No. 646  
(For use of Local Registrar)(No. 429 Meadow St.; ..... Ward)(2) Full Name of Child Raymond Miller

(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

(6) Are Parents Married? No

(7) DATE OF

BIRTH Dec. 30, 1922  
(Name of Month) (Day) (Year)

## FATHER.

## MOTHER.

(8) FULL NAME Oscar Clinksdale

(14) NAME BEFORE MARRIAGE

Annie Miller(9) PRESENT POSTOFFICE OF FATHER Greenville, S. C.

(15) PRESENT POSTOFFICE OF MOTHER

Greenville, S. C.(10) COLOR OR RACE Col.(11) AGE AT LAST BIRTHDAY 20  
(Years)(16) COLOR OR RACE Col.(17) AGE AT LAST BIRTHDAY 19  
(Years)

(12) BIRTHPLACE

Honea Path, S. C.

(18) BIRTHPLACE

S. C.

(13) OCCUPATION

Oil Mill laborer

(19) OCCUPATION

Cook-

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

1

(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... alive... at 12 P. M.  
(Born alive or stillborn) (How A. M. or P. M.)  
on the date above stated.(23) (Signature) Pearl Crocker(24) State whether Physician or Midwife Midwife(25) Address of Physician or Midwife Greenville, S. C.

Given name added from a supplemental report

(26) Witness D. Simpson

(Signature of Witness necessary only when question 22 is signed by mark)

(27) Filed Jan. 3, 1923(28) C. E. Smith Local Registrar

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