

(1) PLACE OF BIRTH

County of

Richland

Township of

or
Inc. Town of

or

City of

Cauldwell

(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

19869

Registration District No.

789

Registered No.

96

(For use of Local Registrar)

St.: Ward)

2) Full Name of Child

Mary Katherine Miller

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

(3) BOY OR GIRL?

G

(4) Twin or Triplet?

(5) Number in order of birth

(6) Are Parents Married?

yes

(7) DATE OF BIRTH

Jan 9 1922

(Name) (Month) (Day) (Year)

FATHER.

(8) FULL NAME

William Andrew Miller

(9) PRESENT POSTOFFICE OF FATHER

3613 Phillep St

(10) COLOR OR RACE

W

(11) AGE AT LAST BIRTHDAY

29

(Years)

(12) BIRTHPLACE

D C

(13) OCCUPATION

Merchant

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

4

MOTHER.

(14) NAME BEFORE MARRIAGE

Lucile Reynolds

(15) PRESENT POSTOFFICE OF MOTHER

3613 Phillep St

(16) COLOR OR RACE

W

(17) AGE AT LAST BIRTHDAY

29

(Years)

(18) BIRTHPLACE

D C

(19) OCCUPATION

House

(21) Number of children of this mother now living, including present birth

4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature)

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

Given name added from a supplemental report

See A.H. Date

6-5-45

Registrar

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

(27) Filed (28) 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.

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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.

McCoy, of Columbia