

## (1) PLACE OF BIRTH

County of Lexington  
 Township of Beulah Creek  
 or  
 Inc. Town of .....  
 or  
 City of .....

## CERTIFICATE OF BIRTH

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

No. 14.—For State Registrar Only  
**14900**

Registration District No. 3160 Registered No. 17  
 (For use of Local Registrar)

(No. .... St.; .... Ward)  
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Marjorie Jewell Miller If child is not yet named, make supplemental report as directed

(3) SEX OF CHILD girl (4) Twin or Triplet no (5) Number in order of birth 1 (6) Age at birth yes (7) DATE OF BIRTH Feb. 10, 1928  
 To be answered only in event of Twin or Triplet (Month of Month) (Day) (Year)

| FATHER.  |  | MOTHER.   |  |
|--|--|---|--|
| (8) FULL NAME <u>Lafayette Miller</u>                                    | (14) NAME BEFORE MARRIAGE <u>Bertie Barr</u> | (9) PRESENT RESIDENCE OF FATHER <u>Steedman S.C.</u>                                | (15) PRESENT RESIDENCE OF MOTHER <u>Steedman</u> |
| (10) COLOR OR RACE <u>white</u>  | (11) AGE AT LAST BIRTHDAY <u>7</u> (Year)    | (16) COLOR OR RACE <u>white</u>   | (17) AGE AT LAST BIRTHDAY <u>23</u> (Year)       |
| (12) BIRTHPLACE  |  | (18) BIRTHPLACE   |  |
| (13) OCCUPATION <u>farming</u>   |  | (19) OCCUPATION <u>farming</u>  |  |
| (20) Number of children born to mother, including present birth <u>1</u> |  | (21) Number of children of this mother now living, including present birth <u>1</u> |  |

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at on the date above stated.

(23) (Signature) mrs. Mary Miller  
 (24) State whether Physician or Midwife midwife (25) Address of Physician or Midwife Lexville S.C.

Given name taken from a supplemental report

Mrs. Woodward, M.O.  
Oct 2 1928  
 Registrar

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

(27) Filed June 9, 1928 (28) S. C. Gantt 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.