

## (1) PLACE OF BIRTH

County of Anderson  
 Township of Rock Mills  
 or  
 Inc. Town of .....  
 or  
 City of .....

## CERTIFICATE OF BIRTH

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

File No. — For State Registrar Only

12886

Registration District No. 31.2 ... Registered No. 8 ...  
 (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 Lizzie Parks ... If child is not yet named, make supplemental report as directed

(3) SEX Girl (4) Twin or Triplet ..... (5) Number in order of birth ..... (6) Age at last birthday ..... (7) DATE OF BIRTH March 10 1923  
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Richard Parks  
 (9) PRESENT POSTOFFICE OF FATHER Anderson S.C.  
 (10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY 25 (Year)  
 (12) BIRTHPLACE .....  
 (13) OCCUPATION Farmer  
 (14) Number of children born to mother, including present birth 2

## MOTHER.

(14) NAME BEFORE MARRIAGE Dora Parks  
 (15) PRESENT POSTOFFICE OF MOTHER Anderson S.C.  
 (16) COLOR OR RACE Black (17) AGE AT LAST BIRTHDAY 25 (Year)  
 (18) BIRTHPLACE .....  
 (19) OCCUPATION Housewife  
 (20) Number of children of this mother now living, including present birth 2

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(22) (Signature) David Lee Smith  
 (23) State whether Physician or Midwife (24) Address of Physician or Midwife

Given name added from a supplemental report

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

(26) Filed May 10 1923. (27) G. H. Wright Local Registrar.

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.