

Sec Vol. 40
No. 29952

(1) PLACE OF BIRTH

County of Richland

Township of

or

Inc. Town of

or

City of Columbia, 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

No. 10.—For State Registrar

20956

Registration District No. 388 Registered No. 234

(For use of Local Registrar)

(No. 2210 Chestnut St.) Ward)

(2) Full Name of Child Alphorza Miller

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

(3) BOY OR GIRL boy (4) Twin or Triplet To be answered only in case of Twins or Triplets (5) Number in order of birth (6) Age of Parent Married yes (7) DATE OF BIRTH Sept 17 1923
(Name) (Month) (Day) (Year)

FATHER

(8) FULL NAME James Miller

(9) PRESENT POSTOFFICE OF FATHER Columbia, S.C.

(10) COLOR OR RACE colored (11) AGE AT LAST BIRTHDAY 21 (Year)

(12) BIRTHPLACE Columbia, S.C.

(13) OCCUPATION Seaman

(14) Number of children born to mother, including present birth 1

MOTHER

(14) NAME BEFORE MARRIAGE Bora Berleson

(15) PRESENT POSTOFFICE OF MOTHER Columbia, S.C.

(16) COLOR OR RACE colored (17) AGE AT LAST BIRTHDAY 18 (Year)

(18) BIRTHPLACE Columbia, S.C.

(19) OCCUPATION House-Keeping

(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 born alive all 30 lbs. on the date above stated. (Born alive or stillborn) (Bour A. M. or P. M.)

(23) (Signature) Jennie Lee

(24) State whether, Physician or Midwife midwife

(25) Address of Physician or Midwife 2109 Glenwood

Given name added from a supplemental report

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

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(27) Filed Oct 2 1923 (28) W. J. Soren
Registrar

*When there was no attending physician or midwife, then the father, household, 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.