

(1) PLACE OF BIRTH
 County of Richland
 Township of
 or
 Inc. Town of
 or
 City of Columbia (No. 1013, Bryant St.; Ward)
 (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
23622

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

(3) BOY OR GIRL? g (4) Twin or Triplet? no (5) Number in order of birth 2 (6) Are Parents Married? Yes (7) DATE OF BIRTH June, 22, 1924
To be answered only in case of twins or triplets (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME H. L. Miller
 (9) PRESENT POSTOFFICE OF FATHER Columbia SC
 (10) COLOR OR RACE W (11) AGE AT LAST BIRTHDAY 27 (Years)
 (12) BIRTHPLACE S.C.
 (13) OCCUPATION Fireman
 (20) Number of children born to mother, including present birth { 2

MOTHER.
 (14) NAME BEFORE MARRIAGE Angelle McGinnis
 (15) PRESENT POSTOFFICE OF MOTHER Columbia SC
 (16) COLOR OR RACE W (17) AGE AT LAST BIRTHDAY 22 (Years)
 (18) BIRTHPLACE Ga
 (19) OCCUPATION —
 (21) Number of children of this mother now living, including present birth { 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 7:20 A. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. M. Du Bose, Jr.
 (24) State whether Physician or Midwife MD (25) Address of Physician or Midwife Columbia, S.C.

Given name added from a supplemental report
 191.....
 Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
 (27) Filed 7-19-1924 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.

M., M., wife