

MARGIN RESERVE FOR BINDING. WHEN PLAINLY, WITH INSTRUCTIONS, OR IN A SEPARATE PLAIN FOR EACH CHILD, AND MARK THE NO. IN CASE OF TWINS OR TRIPLETS. IN THE OTHER, NO. 1 THE OTHER, NO. 2, ETC. IN QUESTION 8. RECORD OF COLUMBIA, COLUMBIA, S. C.

(1) PLACE OF BIRTH

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

**CERTIFICATE OF BIRTH**  
STATE OF SOUTH CAROLINA  
Bureau of Vital Statistics  
State Board of Health

File No.—For State Registrar Only

19394

Registration District No. 3109 Registered No. 33  
(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 Miller Parker (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL Girl (4) Twin or Triplet? X (5) Number in order of birth X (6) Are Parents Married? Yes (7) DATE OF BIRTH May 22  
(Name of Month) (Day) (Year)

**FATHER.**

(8) FULL NAME Leah Anderson  
(9) PRESENT POSTOFFICE OF FATHER Lexington, S.C.  
(10) COLOR OR RACE Caucasian (11) AGE AT LAST BIRTHDAY 45  
(12) BIRTHPLACE Hamfield - S.C.  
(13) OCCUPATION Farmer  
(20) Number of children born to mother, including present birth 12

**MOTHER.**

(14) NAME BEFORE MARRIAGE Miller Jones  
(15) PRESENT POSTOFFICE OF MOTHER Lexington - S.C.  
(16) COLOR OR RACE Caucasian (17) AGE AT LAST BIRTHDAY 38  
(18) BIRTHPLACE Hamfield Co. - S.C.  
(19) OCCUPATION Farming  
(21) Number of children of this mother now living, including present birth 12

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\***

(22) I hereby certify that I attended the birth of this child, who was born at 7:45 A.M., on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)

(23) (Signature) Crashaw Logan

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

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

(27) Filed May 6 1939 (28) Chas. E. Foster 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.