

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD
 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
 BUREAU OF COLUMBIA, COLUMBIA, S. C.
 N. B.—

(1) PLACE OF BIRTH

County of Union

Township of Conesville

Inc. Town of Conesville

City of Conesville

(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

Registration District No. X208

File No.—For State Registrar Only

20400

Registered No. 35
 (For use of Local Registrar)

(2) Full Name of Child Martha Lee Parker

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. Are Parents Married?	7. DATE OF BIRTH <u>June 6, 1922</u> (Month of Month) (Day) (Year)
FATHER			MOTHER	
8. FULL NAME <u>Clarence L. Parker</u>			14. NAME BEFORE MARRIAGE <u>Mary Milwood</u>	
9. PRESENT POSTOFFICE OF FATHER <u>Conesville, S.C.</u>			15. PRESENT POSTOFFICE OF MOTHER <u>Conesville, S.C.</u>	
10. COLOR OR RACE <u>W</u>	11. AGE AT LAST BIRTHDAY <u>27</u> (Years)	16. COLOR OR RACE <u>W</u>	17. AGE AT LAST BIRTHDAY <u>24</u> (Years)	
12. BIRTHPLACE <u>Spokane, W.T.</u>			18. BIRTHPLACE <u>Union Co.</u>	
13. OCCUPATION <u>Merchant</u>			19. OCCUPATION <u>Domestic</u>	
20. Number of children born to mother, including present birth <u>3</u>			21. Number of children of this mother now living, including present birth <u>2</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 10 P. M.,
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) [Signature]

(24) State whether Physician or Midwife (25) Address of Physician or Midwife [Address]

Given name added from a supplement-
 tal report

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

(27) Filed 6/13 19 22 (28) [Signature]
 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.

19 22 (27) Filed 8-19-22 (28) [Signature]
 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.