

## (1) PLACE OF BIRTH

County of Elmore

Township of .....

or

Inc. Town of .....

or

City of Elmore, SC.

## CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

31626

Registration District No. .... Registered No. 94

(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 Edith Miller

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

(3) BOY OR GIRL girl(4) Twin or Triplet? no(5) Number in order of birth 5th(6) Are Parents Married? yes(7) DATE OF BIRTH 7/7/19

(Month) (Day) (Year)

## FATHER.

(8) FULL NAME David Evans Miller(9) PRESENT POSTOFFICE OF FATHER Elmore, SC.(10) COLOR OR RACE white(11) AGE AT LAST BIRTHDAY 35  
(Years)(12) BIRTHPLACE Elmore, SC.(13) OCCUPATION Farmer(20) Number of children born to mother, including present birth 7

## MOTHER.

(14) NAME BEFORE MARRIAGE Annie Doria Ulmer(15) PRESENT POSTOFFICE OF MOTHER Elmore, SC.(16) COLOR OR RACE white(17) AGE AT LAST BIRTHDAY 35  
(Years)(18) BIRTHPLACE Elmore, SC.(19) OCCUPATION Housewife(21) Number of children of this mother now living, including present birth 7

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was alive at 11 P. M.  
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Dr. William H. Homan(24) State whether Physician or Midwife (25) Address of Physician or Midwife Elmore, SC.

Given name added from a supplemental report

(26) Witness .....  
(Signature of Witness necessary only when question 23 is signed by mark)(27) Filed Sept 28, 19 (28) Specimen Local 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.\*When there was no attending physician or midwife, then the father, householder, etc., should make this return.  
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