

## (1) PLACE OF BIRTH

County of Greenwood

Township of .....

Inc. Town of .....

City of Greenwood

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

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

(3) Sex of Child	(4) Twin or Triplet To be answered only in case of Twin or Triplet	(5) Number in order of birth	(6) Age of Child Months	(7) DATE OF BIRTH (Name of Month) (Day) (Year)
girl			year	4 17 23

FATHER.		MOTHER.	
(8) Full Name	<u>Dobson R. Miller</u>	(14) Name before marriage	<u>Bessie Barber</u>
(9) Present Postoffice of Father	<u>Greenwood, S.C.</u>	(15) Present Postoffice of Mother	<u>Greenwood, S.C.</u>
(10) Color or Race	<u>Caucasian</u>	(16) Color or Race	<u>Caucasian</u>
(11) Age at last birthday	<u>52</u> (Years)	(17) Age at last birthday	<u>36</u> (Years)
(12) Birthplace	<u>Bibb Co. Ala.</u>	(18) Birthplace	<u>Union Co. S.C.</u>
(13) Occupation	<u>Miner</u>	(19) Occupation	<u>Domestic</u>
(20) Number of children born to mother, including present birth	<u>2</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 born alive at 10:00 on the date above stated. (Born alive or stillborn (Hour, M. or P. M.))(23) (Signature) R. B. Miller (24) State whether Physician or Midwife (25) Address of Physician or Midwife Greenwood, S.C.

(If name added from a supplemental report)

.....  
 19.....  
 Registrar

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

(27) Filed Mar 10 1923 (28) W. A. Williams 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.

MAINTAIN RECORDS OF THIS BIRTH IN A PERMANENT RECORD. WHEN PLACED, WITH UNFOLDING INFO, THIS IS A PERMANENT RECORD. IN CASE OF TWIN OR TRIPLETS USE A SEPARATE BLANK FOR EACH CHILD, AND MARK THE FIRST-BORN, No. 1, THE OTHER, No. 2, ETC., IN QUESTION 1.