

Form No. 1

(1) PLACE OF BIRTH

County of Marble
 Township of Red Hill
 OF
 Inc. Town of.....
 OF
 City of..... (No.St.;Ward)

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only
41867

Registration District No. 3387 Registered No. 5
 (For use of Local Registrar)

(2) Full Name of Child Miller David Nathaniel (if child is not yet named, make supplemental report as directed)

(2) SEX OR <u>Boy</u>	(4) Twin or Triplet?	(5) Number in order of birth	(6) Age Previous Survival <u>yes</u>	(7) DATE OF BIRTH <u>Oct 28 23</u> (Month) (Day) (Year)
FATHER.			MOTHER.	
(8) FULL NAME <u>J. A. Hester</u>	(14) NAME BEFORE MARRIAGE <u>Betha Coy</u>		(16) PRESENT POSTOFFICE OF MOTHER <u>Bennettsville</u>	
(9) PRESENT POSTOFFICE OF FATHER <u>Bennettsville</u>	(11) AGE AT LAST BIRTHDAY <u>44</u> (Years)	(18) COLOR OR RACE <u>White</u>	(17) AGE AT LAST BIRTHDAY <u>34</u> (Years)	(19) BIRTHPLACE <u>SC</u>
(10) COLOR OR RACE <u>White</u>	(12) BIRTHPLACE <u>SC</u>	(13) OCCUPATION <u>Farm</u>	(15) OCCUPATION <u>HW</u>	(20) Number of children of this mother now living, including present birth <u>2</u>
(20) Number of children born to mother, including present birth <u>2</u>	CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*			

(23) I hereby certify that I attended the birth of this child, who was B. alive at 6 P. M.,
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(24) (Signature) Dr. C. D. Hester
 (25) State whether Physician or Midwife (26) Address of Phys. or Midwife
Physician Bennettsville

Given name added from a supplement-
 al report

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

(27) Filed Oct 4 23 (29) J. H. Evans
 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.

WRITE PLAINLY. WITH SPACING IN—THIS IS A PERMANENT RECORD.
 IN CASE OF TWINS OR TRIPLETS USE A SEPARATE BLANK FOR EACH CHILD. USE MARK X
 FIRST-BORN. NO. 1 THE OTHER, NO. 2, ETC. IN QUESTION 2.

Revised by Columbia, Columbia, S. C.