

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

File No.—For State Registrar Only
44898

(1) PLACE OF BIRTH
County of Union
Township of Pinckney
or
Inc. Town of
or
City of

Registration District No. 4-2-45 Registered No. 129
(For use of Local Registrar)
St.:
Ward:
(No.) (If child is not yet named, make supplemental report as directed)

(2) Full Name of Child William Henry Alex. Miller

(3) BOY OR GIRL? Boy
(4) Twin or Triplet? —
(5) Number in order of birth —
To be answered only in case of Twins or Triplets

(6) Are Parents Married? yes
(7) DATE OF BIRTH Oct 15 1911
(Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME Marion Sidney Miller
(9) PRESENT POSTOFFICE OF FATHER Lockhart S.C.
(10) COLOR OR RACE White
(11) AGE AT LAST BIRTHDAY 27 (Years)
(12) BIRTHPLACE York, Co.
(13) OCCUPATION Mill Work.
(20) Number of children born to mother, including present birth one

MOTHER.
(14) NAME BEFORE MARRIAGE Mary Estline Milton
(15) PRESENT POSTOFFICE OF MOTHER Lockhart S.C.
(16) COLOR OR RACE White
(17) AGE AT LAST BIRTHDAY 17 (Years)
(18) BIRTHPLACE S.C.
(19) OCCUPATION Domestic
(21) Number of children of this mother now living, including present birth one

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) W. D. Pope
(24) State whether Physician or Midwife Physician
(25) Address of Physician or Midwife Lockhart S.C.

Given name added from a supplemental report
....., 191....
..... Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
D. G. Ballman
(27) Filed Jan 11 1912 (28) D. G. Ballman 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.
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MARGIN RESERVED FOR BINDING. WITH READING INK—THIS IS A PERMANENT RECORD. FIRST-BORN N. No. 1. THE OTHER, No. 2, etc., in question 5. N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the