

(1) PLACE OF BIRTH

CERTIFICATE OF BIRTH

County of Richland

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

4350

Township of Palmetto

or

Inc. Town of

or

City of

Registration District No. 2804Registered No. 18

(For use of Local Registrar)

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

(2) Full Name of Child Martha M. Miller

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

(1) Boy GIRL?	(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parents Married?	(7) DATE OF BIRTH
<u>Yes</u>	<u>No</u>	<u>1</u>	<u>Yes</u>	<u>Feb. 1, 1923</u> (Name of Month) (Day) (Year)
FATHER			MOTHER	
(8) FULL NAME			(14) NAME BEFORE MARRIAGE	
<u>Hugh Miller</u>			<u>Carrie Jones</u>	
(9) PRESENT POSTOFFICE OF FATHER			(15) PRESENT POSTOFFICE OF MOTHER	
<u>Camden, S.C.</u>			<u>Camden, S.C.</u>	
(10) COLOR OR RACE	(11) AGE AT LAST BIRTHDAY	(16) COLOR OR RACE	(17) AGE AT LAST BIRTHDAY	
<u>White</u>	<u>23</u> (Years)	<u>White</u>	<u>25</u> (Years)	
(12) BIRTHPLACE		(18) BIRTHPLACE		
<u>Camden, S.C.</u>		<u>Camden, S.C.</u>		
(13) OCCUPATION		(19) OCCUPATION		
<u>Farmer</u>		<u>Farmer</u>		
(20) Number of children born to mother, including present birth		(21) Number of children of this mother now living, including present birth		
<u>3</u>		<u>3</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born, at Camden, S.C., 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

Given name added from a supplement-
tal reportMay 24, 1923Gessie J. Miller

(26) Witness

(Signature of Witness necessary only
when question 23 is signed by mark)Feb 3, 1923J. Shawcross
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 fourth month of pregnancy.

No report is desired of stillbirths