

(1) PLACE OF BIRTH

County of Sp. Landburg
 Township of Campobello
 or
 Inc. Town of
 or
 City of

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

File No.—For State Registrar Only

12854

Registration District No. 401-4Registered No. 23
(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 Leander Miller
 (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Mar 23
 To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Robert Muller
 (9) PRESENT POSTOFFICE OF FATHER Campobello SC # 2
 (10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY 20 (Years)
 (12) BIRTHPLACE South Carolina
 (13) OCCUPATION Farmer
 (20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Ida Boyd
 (15) PRESENT POSTOFFICE OF MOTHER Campobello SC # 2
 (16) COLOR OR RACE Black (17) AGE AT LAST BIRTHDAY 20 (Years)
 (18) BIRTHPLACE South Carolina
 (19) OCCUPATION Housewife
 (21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Alive at 2 A. M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) D. C. Morrow(24) State whether Physician or Midwife (25) Address of Physician or Midwife Physician Campobello SC # 2

Given name added from a supplemental report

(26) Witness

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

(27) Filed 4-31922102Mar 2319222Mar 2319222Mar 23

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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