

(1) PLACE OF BIRTH

County of

Township of

or

City of

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

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics
State Board of Health

File No.—For State Registrar Only

26290

Registration District No.

Registered No. 254..

(For use of Local Registrar)

(No. 19 Fifth St. 19th Ward)

(2) Full Name of Child

Chronis S. Miller

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

(3) BOY OR GIRL

Boy

(4) Twin or Triplet?

To be answered only in case of Twins or Triplets

(5) Number in order of birth

(6) Are Parents Married?

yes

(7) DATE OF

BIRTH

(Name of Month) (Day) (Year)

Jan 12 1922

FATHER.

(8) FULL NAME

Sam Smith

(9) PRESENT POSTOFFICE OF FATHER

197 1/2 St

(10) COLOR OR RACE

white

(11) AGE AT LAST BIRTHDAY

46 (Years)

(12) BIRTHPLACE

S. C. car.

(13) OCCUPATION

Textile worker

(14) NAME BEFORE MARRIAGE

Carie Burger

(15) PRESENT POSTOFFICE OF MOTHER

Rm mill

(16) COLOR OR RACE

white

(17) AGE AT LAST BIRTHDAY

39 (Years)

(18) BIRTHPLACE

S. C. car.

(19) OCCUPATION

Domestic

(20) Number of children born to mother, including present birth

10

(21) Number of children of this mother now living, including present birth

7

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was..... at 3..... on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature)

Geo. J. Walker

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Physician Greenville

Given name added from a supplemental report

(26) Witness

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

(27) Filed

Aug 17 22

(28)

A. H. Massey

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.