

## (1) PLACE OF BIRTH

County of SumterTownship of Millertonor  
Inc. Town of .....or  
City of .....

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

## (2) Full Name of Child

Marion Jeffords

File No.—For State Registrar Only

42429

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

Registration District No. 201Registered No. 65  
(For use of Local Registrar)(No. at home St.; ..... Ward)

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

(3) BOY OR GIRL girl(4) Twin or Triplet? 1

(5) Number in order of birth

(6) Are Parents Married? yes

(7) DATE OF BIRTH

Nov 9 1922  
(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME

Marion Jeffords

(9) PRESENT POSTOFFICE OF FATHER

Millerton

(10) COLOR OR RACE

(11) AGE AT LAST BIRTHDAY 28  
(Year)

(12) BIRTHPLACE

at home

(13) OCCUPATION

mining

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

3

## MOTHER.

(14) NAME BEFORE MARRIAGE

Cara Blaton

(15) PRESENT POSTOFFICE OF MOTHER

Clayton

(16) COLOR OR RACE

white(17) AGE AT LAST BIRTHDAY 21  
(Year)

(18) BIRTHPLACE

at home

(19) OCCUPATION

farming

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

3

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was alive at 4:19 M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) midwife Charlotte Cannon

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife Clayton

Given name added from a supplemental report

(26) Witness

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

(27) Filed See 28 1922(28) J. H. Howell 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.