

N.B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 2.

(1) PLACE OF BIRTH		CERTIFICATE OF BIRTH		No. for this register only	
County of <u>Greenville</u>		STATE OF SOUTH CAROLINA		17778	
Township of <u>Bates</u>		Bureau of Vital Statistics			
Inc. Town of		State Board of Health			
City of		Registration District No. <u>2201</u>		Registered No. <u>34</u>	
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)		(No. St. Ward)		(For use of Local Registrar)	
(2) Full Name of Child <u>Adger Saint King</u> If child is not yet named, make supplemental report as directed					
(3) BOY OR GIRL <u>Boy</u>	(4) Twin or Triplet	(5) Number in order of birth	(6) Age at birth	(7) DATE OF BIRTH <u>June 2, 1923</u>	(8) (Month) (Day) (Year)
FATHER			MOTHER		
(9) FULL NAME <u>Adger Saint King</u>			(14) NAME BEFORE MARRIAGE <u>Paulie King</u>		
(10) PRESENT POST OFFICE OF FATHER <u>Charleston, S.C.</u>			(15) PRESENT POST OFFICE OF MOTHER <u>Charleston</u>		
(16) COLOR OR RACE <u>W</u>	(17) AGE AT LAST BIRTHDAY <u>23</u>	(18) COLOR OR RACE <u>W</u>	(19) AGE AT LAST BIRTHDAY <u>18</u>		
(12) BIRTHPLACE <u>S. C.</u>	(13) OCCUPATION <u>Hammer</u>	(16) BIRTHPLACE <u>S. C.</u>	(17) OCCUPATION <u>Housewife</u>		
(20) Number of children born to mother, including present birth <u>1</u>			(21) Number of children of this mother now living, including present birth <u>1</u>		
CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE					
(22) I hereby certify that I attended the birth of this child, who was <u>Alive</u> on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)					
(23) (Signature)		(24) State whether Physician or Midwife		(25) Address of Physician or Midwife	
<u>Midwife</u>					
(26) Given name added from a supplemental report		(27) Witness (Signature of Witness necessary only when question 22 is signed by mother)			
<u>1-15</u>		<u>Dr. Stone</u>			
Registrar		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.