

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

File No.—For State Registrar Only  
**71280**

(1) PLACE OF BIRTH  
County of Anderson  
Township of Hanna Path  
or  
Inc. Town of ..... Registration District No. 3.07 Registered No. 101  
(For use of Local Registrar)  
City of ..... (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 Allie Louise Gambell 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 3<sup>rd</sup> (6) Are Parents Married? Yes (7) DATE OF BIRTH Aug. 10, 1916  
(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Robert Greene Gambell

(9) PRESENT POSTOFFICE OF FATHER Hanna Path S.C.

(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 46  
(Years)

(12) BIRTHPLACE Greenville S.C.

(13) OCCUPATION Farmer

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

## MOTHER.

(14) NAME BEFORE MARRIAGE Allie Kelly

(15) PRESENT POSTOFFICE OF MOTHER Hanna Path

(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 36  
(Years)

(18) BIRTHPLACE Anderson S.C.

(19) OCCUPATION House work

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

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was born alive, at 11:30 P.M., on the date above stated. (Hour A. M. or P. M.)

(23) (Signature) N.M. Babb  
(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Physician Hanna Path S.C.

Given name added from a supplemental report

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

(27) Filed Aug 11 1916 (28) J. R. Williams  
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.