

(1) PLACE OF BIRTH  
 County of Georgetown  
 Township of 70  
 or  
 Inc. Town of .....  
 or  
 City of ..... (No. .... St.; .... Ward)  
 (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  
**89967**

Registration District No. 2106 Registered No. 70  
 (For use of Local Registrar)  
 (2) Full Name of Child Prince Gilbe Jr { 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 Dec 1916  
 (Name of Month) (Day) (Year)

**FATHER.**  
 (8) FULL NAME Prince Gilbe  
 (9) PRESENT POSTOFFICE OF FATHER Waverly Mills S.C.  
 (10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 20 (Years)  
 (12) BIRTHPLACE South Carolina  
 (13) OCCUPATION Labourer  
 (20) Number of children born to mother, including present birth 1

**MOTHER.**  
 (14) NAME BEFORE MARRIAGE Margaret Ford  
 (15) PRESENT POSTOFFICE OF MOTHER Waverly Mills S.C.  
 (16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 20 (Years)  
 (18) BIRTHPLACE South Carolina  
 (19) OCCUPATION Farm hand  
 (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 born alive at 11:45 P.M. on the date above stated. (Hour A. M. or P. M.)

(23) (Signature) Alma C. Jones  
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife  
Midwife Waverly Mills S.C.

Given name added from a supplemental report

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Registrar

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

(27) Filed Jan 4 1917 (28) Seabell L. Lachman 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.