MARGIN RESERVED FOR BINDING.

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.

If a—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 5.

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of Health

File No.—For State Registrar Only: 20650

(1) PLACE OF BIRTH

County of Abbeville

Township of Abbeville

or Inc. Town of

or City of

Registration District No. 1 CW Registered No. 53 (For use of Local Registrar)

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

(3) BOY OR GIRL: Boy

(4) Twin or Triplet

(5) Number in order of birth

(6) Are Parents Married: Yes

(7) DATE OF BIRTH Oct. 6, 1923 (Name of Month) (Day) (Year)

FATHER.	MOTHER.
(8) Full Name: Jas. Hugh Prince	(14) Name before marriage: Mary Virgen Gilliam
(9) Present Residence of Father: Abbeville, S. C. R.F.D. 3	(15) Present Residence of Mother: Abbevil le, S. C.
(10) Color or Race: White (11) Age at last birthday: 45 (Years)	(16) Color or Race: White (17) Age at last birthday: 43 (Years)
(12) Birthplace: Anderson S. C.	(18) Birthplace: Abbeville, S. C.
(13) Occupation: Contractor	(19) Occupation: Housewife
(20) Number of children born to mother, including present birth: 12	(21) Number of children of this mother now living, including present birth: 12

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive (Born alive or stillborn) at 1:30 P.M. (Hour A. M. or P. M.) on the date above stated.

(23) (Signature) Dr. C. C. Cambrell

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife: Abbeville, S. C.

Given name added from a supplemental report

..... 19.... Registrar

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

(27) Filed Oct 11 1923. (28) L. E. Pressly 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.

..... 19.... Registrar

(27) Filed ..... 19.... (28) ..... 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.