

(1) PLACE OF BIRTH

County of Williamsburg
 Township of Hopewell
 Inc. Town of
 City of

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

37930

Registration District No. 4301Registered No. 1851
(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 Frank Starling

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 Nov 7 19 31
 To be answered only in event of Twin or Triplet (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME Frank Starling
 (9) PRESENT POSTOFFICE OF FATHER Windsor, S.C.
 (10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 27 (Years)
 (12) BIRTHPLACE S. Carolina
 (13) OCCUPATION Day Laborer
 (20) Number of children born to mother, including present birth 2

MOTHER.
 (14) NAME BEFORE MARRIAGE Livert Crook
 (15) PRESENT POSTOFFICE OF MOTHER Windsor, S.C.
 (16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 23 (Years)
 (18) BIRTHPLACE S. Carolina
 (19) OCCUPATION Housewife
 (21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

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

(23) (Signature) E. A. Hannah
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Greenville, S.C.

Given name added from a supplemental report

 Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by mother)
Nov 17 23 J. A. Blackwell
 (27) Filed Local Registrar

*When there was no attending physician or midwife, then the father, householders, 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.