

MARGIN RESERVED FOR BINDING. WHITE PLAINLY. WITH LEADING INK—THIS IS A PERMANENT RECORD. 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 6.

(1) PLACE OF BIRTH

County of Charleston  
 Township of St. James Parish  
 or  
 Inc. Town of McClaurie  
 or  
 City of \_\_\_\_\_

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

File No.—For State Registrar Only  
**14054**

Registration District No. 906 Registered No. 32  
 (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 Prince White (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 2 (6) Are Parents Married? yes (7) DATE OF BIRTH May 1, 1922  
 To be answered only in case of Twins or Triplets (Name of Month) (Day) (Year)

**FATHER.**

(8) FULL NAME Prince White  
 (9) PRESENT POSTOFFICE OF FATHER McClaurie  
 (10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 40  
 (12) BIRTHPLACE Georgetown Co.  
 (13) OCCUPATION Fireman  
 (20) Number of children born to mother, including present birth 2

**MOTHER.**

(14) NAME BEFORE MARRIAGE Lou Snider Harrison  
 (15) PRESENT POSTOFFICE OF MOTHER McClaurie  
 (16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 20  
 (18) BIRTHPLACE Georgetown Co.  
 (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 born alive at 5 a.m.  
 on the date above stated. (Born alive or stillborn; (Hour A. M. or P. M.))

(23) (Signature) State Registrar (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife McClaurie

Given name added from a supplemental report

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

(27) Filed May 9, 1922 (28) G. E. Beckman 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.