

**Abortion Clinics**  
DHEC Regulation 61-12

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
<b>CHARLESTON WOMEN'S MEDICAL CENTER</b> 1312 ASHLEY RIVER RD CHARLESTON, SC 29407-5365 FACILITY #:843-571-5161 BOYLE, LEISA PH#: 843-571-5161 <b>Facility Email:</b> No Facility Email on Record <b>Fac. Cont. Email:</b> No Facility Contact Email on Record	AB-0005 / 07/31/2012 Charleston / Ltd. Liability 1312 ASHLEY RIVER RD CHARLESTON, SC 29407-5365 SC WOMEN'S CENTER LLC
<b>GREENVILLE WOMEN'S CLINIC</b> 1142 GROVE RD GREENVILLE, SC 29605-4692 FACILITY #:864-232-1584 CAMPBELL JR, THOMAS W PH#: 864-232-1584 <b>Facility Email:</b> KATHY.ADAMS99@YAHOO.COM <b>Fac. Cont. Email:</b> No Facility Contact Email on Record	AB-0001 / 07/31/2012 Greenville / Corporation 1142 GROVE RD GREENVILLE, SC 29605-4692 GREENVILLE WOMEN'S CLINIC PA
<b>PLANNED PARENTHOOD OF SOUTH CAROLINA-COLUMBIA</b> 2712 MIDDLEBURG DR STE 107 COLUMBIA, SC 29204-2478 FACILITY #:803-256-4908 BROWN RN, STEPHANIE A PH#: 803-256-4908 <b>Facility Email:</b> STEPHANIE.BROWN@PPHSINC.ORG <b>Fac. Cont. Email:</b> STEPHANIE.BROWN@PPHSINC.ORG	AB-0002 / 07/31/2012 Richland / Non-Profit Corporation 2712 MIDDLEBURG DR STE 107 COLUMBIA, SC 29204-2478 PLANNED PARENTHOOD HEALTH SYSTEMS INC

**Total Number of Facilities: 3**