

(1) PLACE OF BIRTH

County of Georgetown

Township of H.

or
City of H.

or
City of H.

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

DEPARTMENT OF HEALTH

Office of Vital Statistics

Registration District No. 2104 Registered No. 11000

(For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Walter Langley

(3) Sex Boy (4) Age 14.5 (5) Date of Birth 1923

(6) Place of Birth Georgetown, S.C.

(7) Full Name of Father Tomie Langley

(8) Present Postoffice of Father Phenix

(9) Color or Race negro (10) Age at Last Birthday 35

(11) Birthplace Georgetown, S.C.

(12) Occupation Housewife

(13) Number of children born to mother, including present birth 3

(14) Number of children of this mother now living, including present birth 3

(15) Signature of Attending Physician or Midwife Walter Langley

(16) Date of Birth 1923

(17) Address of Physician or Midwife Phenix

(18) Signature of Registrar Walter Langley

(19) Date of Registration 1923

(20) Signature of Registrar Walter Langley

(21) Date of Registration 1923

(22) Signature of Registrar Walter Langley

(23) Date of Registration 1923

(24) Signature of Registrar Walter Langley

(25) Date of Registration 1923

(26) Signature of Registrar Walter Langley

(27) Date of Registration 1923

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(29) Date of Registration 1923

(30) Signature of Registrar Walter Langley

(31) Date of Registration 1923