

(1) PLACE OF BIRTH

County of Richland

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

2324

Township of

or

Inc. Town of Columbia, S.C.

or

City of

Registration District No. 332 Registered No. 1040

(For use of Local Registrar)

(No. 25 Elmore 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 Walter Leigler If child is not yet named, make supplemental report as directed1. BOY OR GIRL
boy

(4) Twin or Triplet?

To be answered only in event of Twins or Triplets

(5) Number in order of birth

(6) Are Parents Married?

(7) DATE OF BIRTH Jan. 30, 1922
(Name) (Month) (Day) (Year)

FATHER.

8. FULL NAME X9. PRESENT POSTOFFICE OF FATHER ✓

(10) COLOR OR RACE

(11) AGE AT LAST BIRTHDAY X

(Year)

12. BIRTHPLACE r

13. OCCUPATION

(20) Number of children born to mother, including present birth 1 one

MOTHER.

(14) NAME BEFORE MARRIAGE Minnie Leigler(15) PRESENT POSTOFFICE OF MOTHER Columbia, S.C.(16) COLOR OR RACE Colored(17) AGE AT LAST BIRTHDAY 19
(Year)(18) BIRTHPLACE Orma(19) OCCUPATION Laborer(21) Number of children of this mother now living, including present birth 1 one

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 1030 A.M.
(Born alive or stillborn) (Hour A. M. or P. M.)
on the date above stated.(23) (Signature) Charney Barrs midwife

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

31 Elmore Ave.

Given name added from a supplemental report

(26) Witness

(Signature of Witness necessary only when question 25 is signed by mark)

(27) Filed 2-519 22

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.

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FIRST-BORN, No. 1. FILE GRANT, No. 2, etc., in Question 8.
MAYOR OF COLUMBIA, COLUMBIA, S. C.