

SOUTH CAROLINA)
COUNTY OF CHARLESTON)

PERSONALLY appeared before me Julia Manigault
being duly sworn says and deposes that she is the mother
of Loretta Evalina Manigault, who was born in the City of
Charleston on July 10, 1933; that the midwife who attended
her did not record this birth and is now dead; that she,
the mother has given the answers on the attached return of
birth and that they are true and correct.

SWORN to before me this
21st day of Sept. A.D. 1932.

Emma P. Pignall
Notary Public, S.C.

Julia Manigault, Mother.

Julia Manigault

Distinguish carefully the different kinds of engineers by setting the full descriptive titles, as civil engineer, mechanical engineer, stationary engineer, etc. Avoid the term "laborer" when a more precise statement of occupation is possible. Do not use the word "mechanic," but give the exact occupation, as carpenter, painter, machinist, etc. Distinguish between retail and wholesale merchants. A person who sells goods should be called a salesman and not a dealer.

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PLACE OF BIRTH

City of CharlestonCounty of CharlestonTown of CharlestonCity of Charleston

Standard Certificate of Birth

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics
State Board of Health 9A

Registration District No. _____

FILE No.—Per State Registrar Only

20105ARegistered No. 1026A(No. -- Human St. between President and Ward)FULL NAME OF CHILD Isabella Kyalina Manigault (If child is not yet named, make supplemental report as directed.)Sex M 11. Parent's birth 1 12. Twin, triplet, or other 1 13. Number, in order of birth 1 14. Premature no 15. Are parents married 16. Date of birth July 10, 1932 17. (Month, day, year)FATHER Isakial Manigault 18. Full maiden name Julia Grant MOTHER19. Residence (usual place of abode) City (If non-resident, give place and State)20. Color or race Col. 21. Age at last birthday 17 (Years)22. Birthplace (city or place) Hamlet, S.C. (State or country)23. Trade, profession, or particular kind of work done, as housekeeper, typist, nurse, clerk, etc. Laundress24. Industry or business in which work was done, as own home, lawyer's office, silk mill, etc. at Home.

25. Date (month and year) last engaged in this work _____ 26. Total time (years) spent in this work _____

17. Total time (years) spent in this work _____

Number of children of this mother at time of this birth and including this child 2 (a) Born alive and now living 2 (b) Born alive but now dead _____ (c) Stillborn _____

29. Cause of stillbirth _____ (Before labor _____ During labor _____)

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was born alive at 2 P.M. on the date above stated. (Born alive or stillborn)(Signed) Anna Nelson, M. D.Address Banker St.Filed Sept. 21, 1932 Leon Banov, M.D.

When there was no attending physician at birth, then the father, householder, or other person should make this return.

Name added from _____ (Date of) _____ supplemental report