

(1) PLACE OF BIRTH

County of Charleston

Township of

or

Inc. Town of

or

City of Charleston

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

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

6832

Registration District No. 9ARegistered No. 446

(For use of Local Registrar)

(No. 90 Reed St. St.; Ward)

(2) Full Name of Child

Norman Ray Walker

If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL <u>Boy</u>	(4) Twin or Triplet? To be answered only in event of Twins or Triplets	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Feb 21 1932</u> (Name of Month) (Day) (Year)
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FATHER.

(8) FULL NAME Raymond Ray Walker(9) PRESENT POSTOFFICE OF FATHER 90 Reed St(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 20 (Years)(12) BIRTHPLACE Sc.(13) OCCUPATION Pipe fitter(20) Number of children born to mother, including present birth 2

MOTHER.

(14) NAME BEFORE MARRIAGE Ester Mae Gable(15) PRESENT POSTOFFICE OF MOTHER 90 Reed St(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 20 (Years)(18) BIRTHPLACE Georgia(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 (Born alive or stillborn) (Hour A. M. or P. M.)
on the date above stated.(23) (Signature) James A. Nelson(24) State whether Physician or Midwife Phys(25) Address of Physician or Midwife 2000 Broad St

Given name added from a supplemental report

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

(27) Filed 4/3 19 32 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.

Filed

1/28

19 32

Registrar

Collected

20

1932

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