

**CERTIFICATE OF BIRTH**  
**STATE OF SOUTH CAROLINA**  
 Bureau of Vital Statistics  
 State Board of Health

File No. — for Baby Register Only  
**413**

County of **Charleston**

Registration District No. **9 A** Registered No. **21**  
 In Town or City of **Charleston** (For use of Local Registrar)  
 No. **252** President St. Ward  
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

Full Name of Child **Theodore Lealane** If child is not yet named, make supplemental report as directed

Is Boy or Girl? **Boy** (4) Twin or Triplet? **No** (5) Number in order of birth **1** (6) Are Parents Married? **Yes** (7) DATE OF BIRTH **Jan 9** 1925  
 (Name of Month) (Day) (Year)

FATHER		MOTHER	
(8) FULL NAME <b>Stephen Lealane</b>	(14) NAME BEFORE MARRIAGE <b>Wattie Singleton</b>	(9) PRESENT RESIDENCE OF FATHER <b>Charleston</b>	(15) PRESENT RESIDENCE OF MOTHER <b>Charleston</b>
(10) COLOR OR RACE <b>negro</b>	(11) AGE AT LAST BIRTHDAY <b>37</b> (Years)	(16) COLOR OR RACE <b>negro</b>	(17) AGE AT LAST BIRTHDAY <b>26</b> (Years)
(12) BIRTHPLACE <b>Charleston</b>	(18) OCCUPATION <b>Carpenter</b>	(19) BIRTHPLACE <b>Charleston</b>	(20) OCCUPATION <b>House Keeper</b>
(21) Number of children born to mother, including present birth <b>4</b>	(22) Number of children of this mother now living, including present birth <b>4</b>		

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE**

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.) **5 A**  
 on the date above stated.

(23) (Signature) **Philip H. Howard**  
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife  
**Midwife - Montague St**

Give name added from a supplemental report

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

(27) Filed **1/13** (28) **Merwin**

Registrar

When there was no attending physician or midwife, then the father, householder, etc., should make this report, if a child breathed even once, it must not be reported as stillborn. No report is desired of children before the first month of pregnancy. If a child was born, it must not be reported as stillborn. No report is desired of children before the first month of pregnancy.