

(1) PLACE OF BIRTH

County of Aiken

Township of Langley

Inc. Town of

City of Clearwater

(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 Register Only

30789

Registration District No. 2129 Registered No. 131

(For use of Local Registrar)

St. (For use of Local Registrar)

Word

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

(2) Full Name of Child Leonard Jenkins

(3) BOY OR GIRL? Boy (4) Twin or triplet? (5) Number in order of birth (6) Are Parents Married? Yes (7) DATE OF BIRTH OCT 6 23 (Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Robert L. Jenkins

(9) PRESENT POSTOFFICE OF FATHER Clearwater, St.

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 31 (Years)

(12) BIRTHPLACE Charleston, S.C.

(13) OCCUPATION Millworker

(14) NAME BEFORE MARRIAGE Basie Lee Leport

(15) PRESENT POSTOFFICE OF MOTHER Clearwater, St.

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 31 (Years)

(18) BIRTHPLACE Augusta, Ga

(19) OCCUPATION Housewife

(20) Number of children born to mother, including present birth 4 (21) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was White, as 6:30 P (Hour A. M. or P. M.) on the date above stated. (Born alive or stillborn)

(23) (Signature) Ray Boone

(24) State whether Physician or Midwife: Physician (25) Address of Physician or Midwife: Langley, S.C.

(Given name added from a supplemental report)

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Registrar

(26) Witness (Signature of Witness necessary only when question 22 is signed by mark)

(27) Filed Nov 3 1923 (28) L. W. Spradley 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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