

(1) PLACE OF BIRTH

CERTIFICATE OF BIRTH

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

File No. - For State Registrar Only 50485

County of S.C. Landry Township of or Inc. Town of or City of (No. (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

Registration District No. 403 Registered No. 4 (For use of Local Registrar)

(2) Full Name of Child } If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Girl (4) Twin or Triplet? (5) Number in order of birth (6) Are Parents Married? yes (7) DATE OF BIRTH Jan 31 1916 (Name of Month) (Day) (Year)

FATHER.

MOTHER.

(8) FULL NAME Fred L. Lant (9) PRESENT POSTOFFICE OF FATHER Cross Anchor S.C. (10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 25 (Years) (12) BIRTHPLACE Cross Anchor S.C. (13) OCCUPATION for name (20) Number of children born to mother, including present birth 2

(14) NAME BEFORE MARRIAGE Stella Marie Vaughan (15) PRESENT POSTOFFICE OF MOTHER Cross Anchor S.C. (16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 24 (Years) (18) BIRTHPLACE Santee, S.C. (19) OCCUPATION Homemaker (21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was Clark at 9:03 P.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) W. C. K. P. (24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report 191 Registrar

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark) (27) Filed Feb 10 1916 (28) C. D. H. 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.

Registrar Local Registrar

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WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD. N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5. N. B.—McCaw, of Columbia.